11/24/2009 11:00

Image# 29935520440

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines The Northwestern Mutual Life Insurance Company Federal PAC 720 E Wisconsin Ave ADDRESS (number and street) Check if different than previously Milwaukee W١ 53202 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS NEW **AMENDED** C00197095 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Oct 20 (M10) Jul 20 (M7) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the 2009 12 08 MA Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Special (30S) Post -Election General (30G) Report for the: Termination Report (TER) in the Election on State of 07 0 1 2009 2009 11 18 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Loretta Mlekoday Type or Print Name of Treasurer Electronically Filed by Loretta Mlekoday 11 24 2009 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004)

FE6AN026

Only

SUMMARY PAGE OF RECEIPTS AND DISRUBSEMENTS

OF RECEIPTS AND DISBURSEMENTS

2 / 574

Write or Type Committee Name

FEC Form 3X (Rev. 02/2003)

The Northwestern Mutual Life Insurance Company Federal PAC

D D 07 0 1 2009 18 2009 11 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2009° 210295.23 January 1 (b) Cash on Hand at 142214.07 Begining of Reporting Period 134036.08 302910.76 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 276250.15 513205.99 6(a) and 6(c) for Column B) 109154.06 346109.90 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 167096.09 167096.09 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D)

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 574

Write or Type Committee Name

The Northwestern Mutual Life Insurance Company Federal PAC

Report Covering the Period:

From: 0 7

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2009

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^Y ^Y ^Y ^Y 2009

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From: (a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	112966.38	228969.76
(ii) Unitemized	21064.94	72927.72
(iii) TOTAL (add Lines 11(a)(i) and (ii)	134031.32	301897.48
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees(such as PACs)(d) Total Contributions (add Lines	0.00	0.00
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	134031.32	301897.48
Transfers From Affiliated/Other Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	1000.00
7. Other Federal Receipts (Dividends, Interest, etc.)	4.76	13.28
. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	134036.08	302910.76
. Total Federal Receipts (subtract Line 18(c) from Line 19)	134036.08	302910.76

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 574

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	270.06	E92.6E
	Expenditures(c) Total Operating Expenditures	279.06	583.65
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	279.06	583.65
22.	Transfers to Affiliated/Other Party		
2	Committees	0.00	0.00
.0.	Federal Candidates/Committeesand Other Political Committees	108500.00	333651.25
4.	Independent Expenditure		
5	(use Schedule E)	0.00	0.00
J.	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
		0.00	0.00
6.	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
28.	Refunds of Contributions To: (a) Individuals/Persons Other		
	Than Political Committees	375.00	375.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees		0.00
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	375.00	375.00
9.	Other Disbursements	0.00	11500.00
80.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely	0.00	0.00
	With Federal Funds		3.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	109154.06	346109.90
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	109154.06	346109.90

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 574

III. N	let Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	tributions (other than loans)	134031.32	301897.48
	ribution Refunds 28(d))	375.00	375.00
	butions (other than loans) Line 34 from Line 33)	133656.32	301522.48
	eral Operating Expenditures 21(a)(i) and Line 21(b))	279.06	583.65
	Operating Expenditures 15, page 3)	0.00	0.00
•	ting Expenditures Line 37 from Line 36)	279.06	583.65

FE6AN026

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	ly not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	y Federal PAC	
Α.	Full Name (Last, First, Middle Initial) John M. Abbott			Date of Receipt
	Mailing Address 609 Laurel Drive			10 31 2009
	City <u>Thiensville</u>	State WI	Zip Code 53092-1323	Transaction ID: 20091105152628-521 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		11.00
	Name of Employer NML	Occupation Dir Fld II		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 219.00	
ь В.	Full Name (Last, First, Middle Initial) John M. Abbott Mailing Address 609 Laurel Drive			Date of Receipt
				11 15 2009
	City Thiensville	State WI	Zip Code 53092-1323	Transaction ID: 2009111816423-522 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		11.00
	Name of Employer NML	Occupation Dir Fld II		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		219.00	
с. С.	Full Name (Last, First, Middle Initial) Mark J. Backe			Date of Receipt
	Mailing Address 4419 N Wildwood Avo	enue		07 31 2009
	City Shorewood	State WI	Zip Code 53211-1408	Transaction ID: 20090804-681-10-0
	FEC ID number of contributing federal political committee.	C	33211-1400	Amount of Each Receipt this Period 20.00
	Name of Employer NML	Occupation Asst Gc	on & Asst Sec	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 360.00	
	SUBTOTAL of Receipts This Page (optional)	1		42.00
	TOTAL This Period (last page this line numbe		<u> </u>	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate sched for each category of Detailed Summary F	the (Crieck only one)
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	g the name and address of any political con	any person for the purpose of soliciting contributions mmittee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mark J. Backe Mailing Address 4419 N Wildwood	Avenue	Date of Receipt
City Shorewood FEC ID number of contributing	State Zip Code WI 53211-1408	0 8 1 5 2 0 0 9 Transaction ID: 20090819-748-14-15 Amount of Each Receipt this Period
federal political committee. Name of Employer NML Receipt For:	Occupation Asst Gc & Asst Sec Aggregate Year-to-Date	20.00
Primary General Other (specify) ▼		0.00
Full Name (Last, First, Middle Initial) Mark J. Backe Mailing Address 4419 N Wildwood	Avenue	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20090902-748-15-1
Shorewood	WI 53211-1408	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	20.00
Name of Employer NML	Occupation Asst Gc & Asst Sec	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	0.00
Full Name (Last, First, Middle Initial) Mark J. Backe	•	Date of Receipt
Mailing Address 4419 N Wildwood		09 / 15 / Y Y Y Y Y Y Y
City Shorewood	State Zip Code WI 53211-1408	Transaction ID: 20090921-744-17-1
FEC ID number of contributing federal political committee.	WI 53211-1408	Amount of Each Receipt this Period 20.00
Name of Employer NML	Occupation Asst Gc & Asst Sec	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	0.00
SUBTOTAL of Receipts This Page (ontion	al)	60.00

SCHEDULE A (FEC Form SITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 574 (check only one) X
Any information copied from such Reports or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Institute of the commercial purposes of the commercial purposes.	and Statements may not be sold or used by any persong the name and address of any political committee to surance Company Federal PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mark J. Backe Mailing Address 4419 N Wildwood	Α Δνεημε	Date of Receipt
City Shorewood	State Zip Code WI 53211-1408	0 9 3 0 2 0 0 9 Transaction ID: 20091008104013-671 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation Asst Gc & Asst Sec Aggregate Year-to-Date 360.00	
Full Name (Last, First, Middle Initial) Mark J. Backe Mailing Address 4419 N Wildwood	d Avenue	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20091015164625-670
Shorewood	WI 53211-1408	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer NML	Occupation Asst Gc & Asst Sec	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	
Full Name (Last, First, Middle Initial) Mark J. Backe		Date of Receipt
Mailing Address 4419 N Wildwood	d Avenue	10 31 2009
City	State Zip Code	Transaction ID: 20091105152628-67
Shorewood FEC ID number of contributing federal political committee.	WI 53211-1408	Amount of Each Receipt this Period 20.00
Name of Employer NML	Occupation Asst Gc & Asst Sec	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	
SUBTOTAL of Receipts This Page (optic	onal)	60.00

ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9/5/4 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may g the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	rance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Mark J. Backe			Date of Receipt
Mailing Address 4419 N Wildwood	Avenue		1 1 1 5 2 0 0 9
City Shorewood	State WI	Zip Code 53211-1408	Transaction ID: 2009111816423-670 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer NML	Occupatio Asst Gc	n & Asst Sec	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 360.00	
Full Name (Last, First, Middle Initial) Jerome Robert Baier	I		Date of Receipt
Mailing Address 19820 Tralee Cour	t		07 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Brookfield	State Zip Code WI 53045-2129		Transaction ID: 20090720-724-13-0
FEC ID number of contributing federal political committee.	C	33043-2129	Amount of Each Receipt this Period 51.00
Name of Employer NML	Occupatio Managin	n g Director	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1071.00	
Full Name (Last, First, Middle Initial) Jerome Robert Baier			Date of Receipt
Mailing Address 19820 Tralee Cour	t		07 31 2009
City Brookfield	State WI	Zip Code 53045-2129	Transaction ID: 20090804-723-10-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30043 2123	51.00
Name of Employer NML	Occupatio Managin	n g Director	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1071.00	
SUBTOTAL of Receipts This Page (option:	<u> </u>		122.00

SCHEDULE A (FEC Form 3X)

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
/	Full Name (Last, First, Middle Initial)		, rederari No	
۸.	Jerome Robert Baier Mailing Address 19820 Tralee Court			Date of Receipt 0 8 1 5 2 0 0 9
	City Brookfield	State WI	Zip Code 53045-2129	Transaction ID: 20090819-790-14-15 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		51.00
	Name of Employer NML	Occupatio Managin	n g Director	
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 1071.00	
3.	Full Name (Last, First, Middle Initial) Jerome Robert Baier Mailing Address 19820 Tralee Court			Date of Receipt
	City	State	Zip Code	0 8 3 1 2 0 0 9 Transaction ID: 20090902-790-15-1
	Brookfield	WI	53045-2129	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		51.00
	Name of Employer NML	Occupatio Managin	n g Director	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1071.00	
_	Full Name (Last, First, Middle Initial) Jerome Robert Baier			Date of Receipt
	Mailing Address 19820 Tralee Court			09 15 2009
	City Brookfield	State WI	Zip Code 53045-2129	Transaction ID: 20090921-785-17-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		51.00
	Name of Employer NML	Occupatio Managin	n g Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1071.00	
	SUBTOTAL of Receipts This Page (optional)	1		153.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11/5/4 (check only one) X 11a
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may g the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	rance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Jerome Robert Baier			Date of Receipt
Mailing Address 19820 Tralee Cour	09 30 2009		
City Brookfield	State WI	Zip Code 53045-2129	Transaction ID: 20091008104013-712 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		51.00
Name of Employer NML	Occupatio Managin	n g Director	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1071.00	
Full Name (Last, First, Middle Initial) Jerome Robert Baier			Date of Receipt
Mailing Address 19820 Tralee Cour	t		10 15 2009
City Brookfield	State WI	Zip Code 53045-2129	Transaction ID: 20091015164625-711 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30043 2123	51.00
Name of Employer NML	Occupatio Managin	n g Director	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1071.00]
Full Name (Last, First, Middle Initial) Jerome Robert Baier			Date of Receipt
Mailing Address 19820 Tralee Cour	t		10 31 2009
City Brookfield	State WI	Zip Code 53045-2129	Transaction ID: 20091105152628-711 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33043-2129	51.00
Name of Employer NML	Occupatio Managin	n g Director	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1071.00	
SUBTOTAL of Receipts This Page (options	al))	153.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 574 (check only one) X 11a
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma ne name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insural	nce Company	/ Federal PAC	
∠ A .	Full Name (Last, First, Middle Initial) Jerome Robert Baier			Date of Receipt
	Mailing Address 19820 Tralee Court			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Brookfield	State WI	Zip Code 53045-2129	Transaction ID: 2009111816423-711
	FEC ID number of contributing federal political committee.	C	53045-2129	Amount of Each Receipt this Period 51.00
	Name of Employer NML	Occupation	on g Director	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1071.00	
– В.	Full Name (Last, First, Middle Initial) David A. Barras			Date of Receipt
	Mailing Address 8700 W Bennington (07 15 2009		
	City	State	Zip Code	Transaction ID: 20090720-704-13-0
	Mequon FEC ID number of contributing federal political committee.	C	53097-3440	Amount of Each Receipt this Period 25.00
	Name of Employer NML	Occupation Managin	on ng Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 585.00	
_ С.	Full Name (Last, First, Middle Initial) David A. Barras			Date of Receipt
	Mailing Address 8700 W Bennington (Court		07 31 2009
	City Mequon	State WI	Zip Code 53097-3440	Transaction ID: 20090804-703-10-0
	FEC ID number of contributing federal political committee.	C	55097-5440	Amount of Each Receipt this Period 25.00
	Name of Employer NML	Occupation Managin	on g Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 585.00	
	SUBTOTAL of Receipts This Page (optional)	1		101.00
F	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS) /)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13/5/4 (check only one)		
Any information copied from such Reports or for commercial purposes, other than usir	and Statements may	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Inst		•			
Full Name (Last, First, Middle Initial) David A. Barras			Date of Receipt		
	ailing Address 8700 W Bennington Court				
City <u>Mequon</u>	State WI	Zip Code 53097-3440	0 8 1 5 2 0 0 9 Transaction ID: 20090819-770-14-15 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		25.00		
Name of Employer NML	Occupation Managing	n g Director			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 585.00			
Full Name (Last, First, Middle Initial) David A. Barras			Date of Receipt		
Mailing Address 8700 W Benningto	on Court		0 8 3 1 2 0 0 9		
City Meguon	State WI		Transaction ID: 20090902-770-15-1 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	53097-3440	25.00		
Name of Employer NML	Occupation	n g Director			
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 585.00			
Full Name (Last, First, Middle Initial) David A. Barras			Date of Receipt		
Mailing Address 8700 W Benningto	on Court		09 15 2009		
City Mequon	State WI	Zip Code 53097-3440	Transaction ID: 20090921-765-17-1		
FEC ID number of contributing federal political committee.	C	33097-3440	Amount of Each Receipt this Period 25.00		
Name of Employer NML	Occupation Managine	n g Director			
Receipt For: Primary General Other (specify) ▼	- 	Year-to-Date ▼ 585.00			
SUBTOTAL of Receipts This Page (option	nal)		75.00		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 574 (check only one) X			
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to				
The Northwestern Mutual Life Ins	urance Company Federal PAC				
Full Name (Last, First, Middle Initial) David A. Barras		Date of Receipt			
Mailing Address 8700 W Benningt		09 30 2009			
City <u>Mequon</u>	State Zip Code WI 53097-3440	Transaction ID: 20091008104013-692 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	25.00			
Name of Employer NML	Occupation Managing Director				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00				
Full Name (Last, First, Middle Initial) David A. Barras		Date of Receipt			
Mailing Address 8700 W Bennington	g Address 8700 W Bennington Court				
City	State Zip Code	Transaction ID: 20091015164625-69			
Mequon FEC ID number of contributing federal political committee.	WI 53097-3440	Amount of Each Receipt this Period 25.00			
Name of Employer NML	Occupation Managing Director				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00				
Full Name (Last, First, Middle Initial) David A. Barras		Date of Receipt			
Mailing Address 8700 W Benningt	on Court	10 31 2009			
City Meguon	State Zip Code WI 53097-3440	Transaction ID: 20091105152628-69 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	25.00			
Name of Employer NML	Occupation Managing Director				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00				
SURTOTAL of Receipts This Page (ontion	nal)	75.00			

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15/5/4 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	<u>- </u>		
Full Name (Last, First, Middle Initial) David A. Barras			Date of Receipt
Mailing Address 8700 W Benningto	on Court		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Mequon	State WI	Zip Code 53097-3440	Transaction ID: 2009111816423-691 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer NML	Occupatio Managin	n g Director	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 585.00	
Full Name (Last, First, Middle Initial) Rebekah B. Barsch	I		Date of Receipt
Mailing Address 4842 N Bartlett Av	renue		0 7 3 1 2 0 0 9
City Whitefish Bay	State WI	Zip Code 53217-6016	Transaction ID: 20090804-849-10-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33217 0010	15.00
Name of Employer NML	Occupatio Dir Strat	n Plng & Cnsltg	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 315.00	
Full Name (Last, First, Middle Initial) Rebekah B. Barsch			Date of Receipt
Mailing Address N46 W5455 Spring	g Court		0 8 1 5 2 0 0 9
City	State	Zip Code	Transaction ID: 20090819-916-14-1
Cedarburg FEC ID number of contributing federal political committee.	C	53012	Amount of Each Receipt this Period 15.00
Name of Employer NML	Occupatio Dir Strat	n Plng & Cnsltg	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 315.00	
SUBTOTAL of Receipts This Page (option	al)		55.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 574 (check only one) X 11a	
or for commercial purposes, other than u	is and Statements may not be sold or used by any perso sing the name and address of any political committee to insurance Company Federal PAC	n for the purpose of soliciting contributions	
Full Name (Last, First, Middle Initial) Rebekah B. Barsch Mailing Address N46 W5455 Spi	ring Court	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City Cedarburg	State Zip Code WI 53012	0 8 3 1 2 0 0 9 Transaction ID: 20090902-916-15-1 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee. Name of Employer	Occupation	15.00	
Receipt For: Primary General Other (specify)	Dir Strat Plng & Cnsltg Aggregate Year-to-Date ▼ 315.00		
Full Name (Last, First, Middle Initial) Rebekah B. Barsch Mailing Address N46 W5455 Spi			
City	State Zip Code	0 9 1 5 2 0 0 9 Transaction ID: 20090921-911-17-1	
Cedarburg	WI 53012	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	15.00	
Name of Employer NML	Occupation Dir Strat Plng & Cnsltg		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00		
Full Name (Last, First, Middle Initial) Rebekah B. Barsch Mailing Address N46 W5455 Spi	ring Court	Date of Receipt	
City	State Zip Code	0 9 3 0 2 0 0 9 Transaction ID: 20091008104013-838	
<u>Cedarburg</u>	WI 53012	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	15.00	
Name of Employer NML	Occupation Dir Strat Plng & Cnsltg		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00		
SUBTOTAL of Receipts This Page (op:	ional)	45.00	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 574 (check only one) X 11a 11b 11c 12
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may not be sold or used by any persognithe name and address of any political committee to	n for the purpose of soliciting contributions oscilicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	urance Company Federal PAC	
Full Name (Last, First, Middle Initial) Rebekah B. Barsch		Date of Receipt
Mailing Address N46 W5455 Spring	g Court	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20091015164625-83
Cedarburg	WI 53012	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer NML	Occupation Dir Strat Plng & Cnsltg	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	
Full Name (Last, First, Middle Initial) Rebekah B. Barsch		Date of Receipt
Mailing Address N46 W5455 Spring	g Court	10 31 7 2009
City	State Zip Code	Transaction ID: 20091105152628-83
Cedarburg	WI 53012	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer NML	Occupation Dir Strat Plng & Cnsltg	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	315.00	
Full Name (Last, First, Middle Initial) Rebekah B. Barsch		Date of Receipt
Mailing Address N46 W5455 Spring	g Court	1 1 1 5 2 0 0 9
City	State Zip Code	Transaction ID: 2009111816423-837
Cedarburg	WI 53012	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer NML	Occupation Dir Strat Plng & Cnsltg	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	315.00]
	nal)	45.00

	CHEDULE A (FEC Form 3X EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Ai	for commercial purposes, other than using t	Statements may not be sold or used by any pers he name and address of any political committee t	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	ance Company Federal PAC	
٠.	Full Name (Last, First, Middle Initial) Gary H Barsness		Date of Receipt
	Mailing Address 1671 Deer Springs C	Circle	07 15 2009
	City Bettendorf	State Zip Code IA 52722-7148	Transaction ID: 20090720-1184-13-1
	FEC ID number of contributing	IA 52722-7148	Amount of Each Receipt this Period 42.00
	federal political committee.		
	Name of Employer Self-Employed	Occupation General Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 882.00	
_	Full Name (Last, First, Middle Initial) Gary H Barsness	Date of Receipt	
	Mailing Address 1671 Deer Springs C	07 31 2009	
	City	State Zip Code	Transaction ID: 20090804-1182-10-0
	Bettendorf	IA 52722-7148	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.00
	Name of Employer Self-Employed	Occupation General Insurance Agent	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	882.00	
_	Full Name (Last, First, Middle Initial) Gary H Barsness		Date of Receipt
	Mailing Address 1671 Deer Springs C	Circle	0 8 1 5 2 0 0 9
	City	State Zip Code	Transaction ID: 20090819-7-14-0
	Bettendorf	IA 52722-7148	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.00
	Name of Employer Self-Employed	Occupation General Insurance Agent	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	882.00	
Г			126.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 574 (check only one) X
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to	
The Northwestern Mutual Life Ins	urance Company Federal PAC	
Full Name (Last, First, Middle Initial) Gary H Barsness		Date of Receipt
Mailing Address 1671 Deer Spring		08 / 31 / 2009
City Bettendorf	State Zip Code IA 52722-7148	Transaction ID: 20090902-7-14-46 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 32722-7140	42.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 882.00	
Full Name (Last, First, Middle Initial) Gary H Barsness	Date of Receipt	
Mailing Address 1671 Deer Spring	09 15 7 9 9	
City	State Zip Code	Transaction ID: 20090921-7-16-16
Bettendorf	IA 52722-7148	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	882.00	
Full Name (Last, First, Middle Initial) Gary H Barsness	L	Date of Receipt
Mailing Address 1671 Deer Spring	s Circle	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20091008103448-7
Bettendorf	IA 52722-7148	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 882.00	
CURTOTAL of Descripts This Daws (anti-	nal)	126.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 574 (check only one) X
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Gary H Barsness Mailing Address 1671 Deer Springs Circ City	cle	Zip Code	Date of Receipt M
	Bettendorf FEC ID number of contributing federal political committee.	IA C	52722-7148	Amount of Each Receipt this Period 42.00
	Name of Employer Self-Employed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Insurance Agent e Year-to-Date ■ 882.00	
В.	Full Name (Last, First, Middle Initial) Gary H Barsness Mailing Address 1671 Deer Springs Circ	cle		Date of Receipt 10 31 2009
	City	State	Zip Code	Transaction ID: 20091105152043-7
	Bettendorf FEC ID number of contributing federal political committee.	C	52722-7148	Amount of Each Receipt this Period 42.00
	Name of Employer Self-Employed	Occupation General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 882.00	
С.	Full Name (Last, First, Middle Initial) Gary H Barsness Mailing Address 1671 Deer Springs Circ	cle		Date of Receipt 1 1 1 1 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 20091118163132-7
	Bettendorf FEC ID number of contributing federal political committee.	C	52722-7148	Amount of Each Receipt this Period 42.00
	Name of Employer Self-Employed	Occupation General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 882.00	
	SUBTOTAL of Receipts This Page (optional)			126.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 574 (check only one) X	
	nd Statements may not be sold or used by any person the name and address of any political committee to		
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	rance Company Federal PAC		
Full Name (Last, First, Middle Initial) Douglas P. Bates		Date of Receipt	
Mailing Address 5413 Mount Corco	u	07 15 2009	
City	State Zip Code	Transaction ID: 20090720-573-13-0	
Burke FEC ID number of contributing	VA 22015-2188	Amount of Each Receipt this Period 35.00	
federal political committee.		33.00	
Name of Employer NML	Occupation VP Federal Relations		
Receipt For:	Aggregate Year-to-Date ▼		
Primary General Other (specify) ▼	735.00		
Full Name (Last, First, Middle Initial) Douglas P. Bates		Date of Receipt	
Mailing Address 5413 Mount Corco	Mailing Address 5413 Mount Corcoran Place		
City	State Zip Code	Transaction ID: 20090804-573-10-0	
<u>Burke</u>	VA 22015-2188	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	35.00	
Name of Employer NML	Occupation VP Federal Relations		
Receipt For:	Aggregate Year-to-Date ▼		
Primary General Other (specify) ▼	735.00		
Full Name (Last, First, Middle Initial) Douglas P. Bates		Date of Receipt	
Mailing Address 5413 Mount Corcor	an Place	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: 20090819-641-14-1	
Burke	VA 22015-2188	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	35.00	
Name of Employer NML	Occupation VP Federal Relations		
Receipt For:	Aggregate Year-to-Date ▼		
Primary General Other (specify) ▼	735.00		
		105.00	

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 574 (check only one) X 11a 11b 11c 12
Any information copied from such Reports a or for commercial purposes, other than using	Ind Statements may not be sold or used by any pers g the name and address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	rance Company Federal PAC	
Full Name (Last, First, Middle Initial) Douglas P. Bates		Date of Receipt
Mailing Address 5413 Mount Corco	ran Place	08 31 2009
City	State Zip Code	Transaction ID: 20090902-641-15-1
Burke	VA 22015-2188	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	35.00
Name of Employer NML	Occupation VP Federal Relations	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	735.00	
Full Name (Last, First, Middle Initial) Douglas P. Bates	'	Date of Receipt
Mailing Address 5413 Mount Corco	ran Place	09 15 YYYY 2009
City	State Zip Code	Transaction ID: 20090921-639-17-1
Burke	VA 22015-2188	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	35.00
Name of Employer NML	Occupation VP Federal Relations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 735.00	
Full Name (Last, First, Middle Initial) Douglas P. Bates		Date of Receipt
Mailing Address 5413 Mount Corco	ran Place	09 30 YYYYY 2009
City	State Zip Code	Transaction ID: 20091008104013-5
Burke	VA 22015-2188	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	35.00
Name of Employer NML	Occupation VP Federal Relations	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	735.00	
		105.00

TOTAL This Period (last page this line number only)

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule for each category of the Detailed Summary Pag	(cricer of my offer
0	ny information copied from such Reports and r for commercial purposes, other than using to NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	he name and address of any political comm	y person for the purpose of soliciting contributions littee to solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Douglas P. Bates		Date of Receipt
	Mailing Address 5413 Mount Corcora		10 15 2009
	City Burke	State Zip Code VA 22015-2188	Transaction ID: 20091015164625-564 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 22013-2100	35.00
	Name of Employer NML	Occupation VP Federal Relations	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	00 0
	Full Name (Last, First, Middle Initial) Douglas P. Bates	Date of Receipt	
	Mailing Address 5413 Mount Corcora	10 31 2009	
	City	State Zip Code	Transaction ID: 20091105152628-564
	Burke	VA 22015-2188	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	35.00
	Name of Employer NML	Occupation VP Federal Relations	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 735.0	00
_	Full Name (Last, First, Middle Initial) Douglas P. Bates Mailing Address 5413 Mount Corcora	n Place	Date of Receipt
	City	State Zip Code	Transaction ID: 2009111816423-565
	Burke FEC ID number of contributing federal political committee.	VA 22015-2188	Amount of Each Receipt this Period 35.00
	Name of Employer NML	Occupation VP Federal Relations	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	00
	SUBTOTAL of Receipts This Page (optional		105.00

SCHEDULE A (FEC Form 3. ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24/5/4 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may g the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	ırance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Blaise C. Beaulier			Date of Receipt
Mailing Address 23300 Dover Line	Road		07 15 2009
City Waterford	State WI	Zip Code 53185-4908	Transaction ID: 20090720-1000-13-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		26.00
Name of Employer NML	Occupation VP IS	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 498.00	
Full Name (Last, First, Middle Initial) Blaise C. Beaulier	 		Date of Receipt
Mailing Address 23300 Dover Line	Road		07 31 7 2009
City Waterford	State WI	Zip Code 53185-4908	Transaction ID: 20090804-998-10-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		26.00
Name of Employer NML	Occupation VP IS	n	
Receipt For: Primary General Other (specify) ▼	- 	Year-to-Date ▼ 498.00	
Full Name (Last, First, Middle Initial) Blaise C. Beaulier			Date of Receipt
Mailing Address 23300 Dover Line	Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Waterford	State WI	Zip Code 53185-4908	Transaction ID: 20090819-1065-14-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30103 4300	26.00
Name of Employer NML	Occupation VP IS	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 498.00	
SUBTOTAL of Receipts This Page (option	nal)		78.00

SCHEDULE A (FEC Form 3X)

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and	Statements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 574 (check only one) X 11a
\ \	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	e name and ad	ldress of any political committee t	o solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) Blaise C. Beaulier Mailing Address 23300 Dover Line Ro.	ad		Date of Receipt
	City Waterford	State WI	Zip Code 53185-4908	Transaction ID: 20090902-1065-15-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33103-4300	26.00
	Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation VP IS Aggregate	e Year-to-Date ▼ 498.00	
- В.	Full Name (Last, First, Middle Initial) Blaise C. Beaulier Mailing Address 23300 Dover Line Ro	Date of Receipt 0 9 1 5 2 0 0 9		
	City Waterford	State WI	Zip Code 53185-4908	Transaction ID: 20090921-1058-17-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer	Occupation	on	26.00
	NML Receipt For: Primary General Other (specify) ▼	VP IS	e Year-to-Date ▼ 498.00	
C.	Full Name (Last, First, Middle Initial) Blaise C. Beaulier Mailing Address 23300 Dover Line Ro	ad		Date of Receipt 0 9 3 0 2 0 0 9
	City	State	Zip Code	Transaction ID: 20091008104013-984
	Waterford FEC ID number of contributing federal political committee.	C	53185-4908	Amount of Each Receipt this Period 26.00
	Name of Employer NML	Occupation VP IS	on	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 498.00	
	SUBTOTAL of Receipts This Page (optional) .			78.00
	TOTAL This Period (last page this line numbe	r only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 574 (check only one) X		
	Any information copied from such Reports and or for commercial purposes, other than using the succession of the successi	Statements ma ne name and ad	ly not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	` '	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance Company Federal PAC				
Α.	Full Name (Last, First, Middle Initial) Blaise C. Beaulier			Date of Receipt		
	Mailing Address 23300 Dover Line Ro		7:n Codo	10 15 2009		
	City Waterford	State W1	Zip Code 53185-4908	Transaction ID: 20091015164625-983 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		26.00		
	Name of Employer NML	Occupation VP IS	on			
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General Other (specify) ▼		498.00			
В.	Full Name (Last, First, Middle Initial) Blaise C. Beaulier	Date of Receipt				
	Mailing Address 23300 Dover Line Ro	10 31 2009				
	City	State	Zip Code	Transaction ID: 20091105152628-983		
	Waterford	WI	53185-4908	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		26.00		
	Name of Employer NML	Occupation VP IS	on			
	Receipt For:	Aggregate	e Year-to-Date			
	Primary General Other (specify) ▼	0 0	498.00			
C .	Full Name (Last, First, Middle Initial) Blaise C. Beaulier			Date of Receipt		
	Mailing Address 23300 Dover Line Ro	oad		1 1 1 5 2 0 0 9		
	City Waterford	State WI	Zip Code	Transaction ID: 2009111816423-982		
	FEC ID number of contributing federal political committee.	C	53185-4908	Amount of Each Receipt this Period 26.00		
	Name of Employer NML	Occupation VP IS	on			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 498.00			
	SUBTOTAL of Receipts This Page (optional)			78.00		
	TOTAL This Period (last page this line numb		<u> </u>			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	e Company	Federal PAC	
Full Name (Last, First, Middle Initial) Mitchell C Beer			Date of Receipt
Mailing Address 3387 Hampton Court			07 15 2009
City	State	Zip Code	Transaction ID: 20090720-1222-13-
Thousand Oaks	CA	91362-1130	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer NML	Occupatio	n Insurance Agent	
Receipt For:	-	e Year-to-Date	
Primary General Other (specify) ▼	Aggregate	882.00	
Full Name (Last, First, Middle Initial) Mitchell C Beer			Date of Receipt
Mailing Address 3387 Hampton Court			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20090804-1219-10-
Thousand Oaks	CA	91362-1130	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer NML	Occupatio General	n Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 882.00	
Full Name (Last, First, Middle Initial) Mitchell C Beer			Date of Receipt
Mailing Address 3387 Hampton Court			0 8 1 5 2 0 0 9
City	State	Zip Code	Transaction ID: 20090819-44-14-0
Thousand Oaks	CA	91362-1130	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer NML	Occupatio General	n Insurance Agent	
Receipt For: Primary General Other (specify) ▼	-	e Year-to-Date ▼ 882.00	
SUBTOTAL of Receipts This Page (optional))	126.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28/5/4 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur			
Full Name (Last, First, Middle Initial) Mitchell C Beer			Date of Receipt
Mailing Address 3387 Hampton Cou	rt		08 31 2009
City Thousand Oaks	State CA	Zip Code 91362-1130	Transaction ID: 20090902-44-14-46 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer NML	Occupation General	n Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 882.00	
Full Name (Last, First, Middle Initial) Mitchell C Beer			Date of Receipt
Mailing Address 3387 Hampton Cou	rt		0 9 1 5 2 0 0 9
City Thousand Oaks	State CA	Zip Code 91362-1130	Transaction ID: 20090921-45-16-16 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer NML	Occupation	n Insurance Agent	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 882.00	
Full Name (Last, First, Middle Initial) Mitchell C Beer			Date of Receipt
Mailing Address 3387 Hampton Cou	rt		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Thousand Oaks	State CA	Zip Code 91362-1130	Transaction ID: 20091008103448-45
FEC ID number of contributing federal political committee.	C	91302-1130	Amount of Each Receipt this Period 42.00
Name of Employer NML	Occupation General	n Insurance Agent	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 882.00	
SUBTOTAL of Receipts This Page (optional	l)		126.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29/5/4 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura		•	
Full Name (Last, First, Middle Initial) Mitchell C Beer			Date of Receipt
Mailing Address 3387 Hampton Cou	rt		M M / D D / Y Y Y Y Y 1 1 5 1 5 2 0 0 9
City Thousand Oaks	State CA	Zip Code 91362-1130	Transaction ID: 2009102293957-45 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer NML	Occupation General	n Insurance Agent	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 882.00	
Full Name (Last, First, Middle Initial) Mitchell C Beer			Date of Receipt
Mailing Address 3387 Hampton Cou	rt		M M / D D / Y Y Y Y Y Y 1 Y 1 D D / 2 0 0 9
City Thousand Oaks	State CA	Zip Code 91362-1130	Transaction ID: 20091105152043-45
FEC ID number of contributing federal political committee.	C	91302-1130	Amount of Each Receipt this Period 42.00
Name of Employer NML	Occupation	n Insurance Agent	
Receipt For: Primary General Other (specify)	- ' '	e Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Mitchell C Beer			Date of Receipt
Mailing Address 3387 Hampton Cou	rt		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Thousand Oaks	State	Zip Code	Transaction ID: 20091118163132-45
FEC ID number of contributing federal political committee.	CA	91362-1130	Amount of Each Receipt this Period 42.00
Name of Employer NML	Occupation General	n Insurance Agent	
Receipt For: Primary General Other (specify) ▼	'	Year-to-Date ▼ 882.00	
SUBTOTAL of Receipts This Page (optional)		126.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	for e	separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: PAGE 30 / 5 / 4 (check only one)
Any information copied from such Reports or for commercial purposes, other than usin	and Statements may not be	sold or used by any perso any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Inst	urance Company Feder	al PAC	
Full Name (Last, First, Middle Initial) John P Bender			Date of Receipt
Mailing Address 116 Belden Hill Ro	oad		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Wilton		Code 897-2911	Transaction ID: 20090720-1225-13-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer Self-Employed	Occupation General Insurar	nce Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to	D-Date ▼	
Full Name (Last, First, Middle Initial) John P Bender			Date of Receipt
Mailing Address 116 Belden Hill Ro	pad		0 7 3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Wilton		Code 897-2911	Transaction ID: 20090804-1222-10-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer Self-Employed	Occupation General Insurar	nce Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to		
Full Name (Last, First, Middle Initial) John P Bender			Date of Receipt
Mailing Address 116 Belden Hill Ro	oad		M M / D D / Y Y Y Y Y O O O O O
City Wilton	·	Code 8897-2911	Transaction ID: 20090819-47-14-0
FEC ID number of contributing federal political committee.	C	097-2911	Amount of Each Receipt this Period 50.00
Name of Employer Self-Employed	Occupation General Insurar	nce Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to		
SUBTOTAL of Receipts This Page (option	nal)		150.00

or for commercial purposes, ot NAME OF COMMITTEE (II The Northwestern Mutu Full Name (Last, First, Mido John P Bender Mailing Address 116 Bel City Wilton FEC ID number of contribut federal political committee. Name of Employer Self-Employed Receipt For: Primary Other (specify) Wilton FEC ID number of contribut federal political committee. City Wilton FUll Name (Last, First, Mido John P Bender Name of Employer Self-Employed Receipt For: Primary Ger Other (specify) Full Name (Last, First, Mido John P Bender Full Name (Last, First, Mido John P Bender)	her than using the name and n Full) ual Life Insurance Comp dle Initial) Iden Hill Road State CT ting Occup Gene	any Federal PAC E Zip Code 06897-2911	Date of Receipt Date of Receipt
Full Name (Last, First, Midd John P Bender Mailing Address 116 Bel City Wilton FEC ID number of contribut federal political committee. Name of Employer Self-Employed Receipt For: Primary Ger Other (specify) Wilton FEC ID number of contribut federal political committee. City Wilton FEC ID number of contribut federal political committee. Name of Employer Self-Employed Receipt For: Primary Ger Other (specify) College Ger Other (specify) Full Name (Last, First, Midd John P Bender Mailing Address 116 Bel City Wilton FEC ID number of contribut federal political committee.	Ide Initial) Iden Hill Road State CT ting Occup Gene Aggre	e Zip Code 06897-2911 pation ral Insurance Agent gate Year-to-Date	Transaction ID: 20090902-47-14-46 Amount of Each Receipt this Period
A. John P Bender Mailing Address 116 Bel City Wilton FEC ID number of contribut federal political committee. Name of Employer Self-Employed Receipt For: Primary Ger Other (specify) ▼ Full Name (Last, First, Midd John P Bender Mailing Address 116 Bel City Wilton FEC ID number of contribut federal political committee. Name of Employer Self-Employed Receipt For: Primary Ger Other (specify) ▼ Full Name (Last, First, Midd John P Bender Mailing Address 116 Bel City Wilton FEC ID number of contribut federal political committee.	State CT ting Occup Gene Aggre	oation ral Insurance Agent gate Year-to-Date ▼	Transaction ID: 20090902-47-14-46 Amount of Each Receipt this Period
City Wilton FEC ID number of contribut federal political committee. Name of Employer Self-Employed Receipt For: Primary Ger Other (specify) ▼ Full Name (Last, First, Mido John P Bender Mailing Address 116 Bel City Wilton FEC ID number of contribut federal political committee. Name of Employer Self-Employed Receipt For: Primary Ger Other (specify) ▼ Full Name (Last, First, Mido John P Bender Mailing Address 116 Bel City Wilton FEC ID number of contribut federal political committee.	State CT ting C Occup Gene Aggre	oation ral Insurance Agent gate Year-to-Date ▼	0 8 3 1 2 0 0 9 Transaction ID: 20090902-47-14-46 Amount of Each Receipt this Period
Wilton FEC ID number of contribut federal political committee. Name of Employer Self-Employed Receipt For: Primary Ger Other (specify) ▼ Full Name (Last, First, Mido John P Bender Mailing Address 116 Bel City Wilton FEC ID number of contribut federal political committee. Name of Employer Self-Employed Receipt For: Primary Ger Other (specify) ▼ Full Name (Last, First, Mido John P Bender Mailing Address 116 Bel City Wilton FEC ID number of contribut federal political committee.	ting C Occup Gene Aggre	oation ral Insurance Agent gate Year-to-Date ▼	Amount of Each Receipt this Period
federal political committee. Name of Employer Self-Employed Receipt For: Primary Ger Other (specify) ▼ Full Name (Last, First, Midd John P Bender Mailing Address 116 Bel City Wilton FEC ID number of contribut federal political committee. Name of Employer Self-Employed Receipt For: Primary Ger Other (specify) ▼ Full Name (Last, First, Midd John P Bender Mailing Address 116 Bel City Wilton FEC ID number of contribut federal political committee.	Occup Gene Aggre	ral Insurance Agent gate Year-to-Date ▼	50.00
Receipt For: Primary Other (specify) Full Name (Last, First, Mido John P Bender Mailing Address 116 Bel City Wilton FEC ID number of contribut federal political committee. Name of Employer Self-Employed Receipt For: Primary Ger Other (specify) Full Name (Last, First, Mido John P Bender Mailing Address 116 Bel City Wilton FEC ID number of contribut federal political committee.	Gene Aggre	ral Insurance Agent gate Year-to-Date ▼	
Primary Ger Other (specify) ▼ Full Name (Last, First, Mido John P Bender Mailing Address 116 Bel City Wilton FEC ID number of contribut federal political committee. Name of Employer Self-Employed Receipt For: Primary Ger Other (specify) ▼ Full Name (Last, First, Mido John P Bender Mailing Address 116 Bel City Wilton FEC ID number of contribut federal political committee.			
B. John P Bender Mailing Address 116 Bel City Wilton FEC ID number of contribut federal political committee. Name of Employer Self-Employed Receipt For: Primary Ger Other (specify) ▼ Full Name (Last, First, Midd John P Bender Mailing Address 116 Bel City Wilton FEC ID number of contribut federal political committee.		1 1 1 1 1 1 1 1	
City Wilton FEC ID number of contribut federal political committee. Name of Employer Self-Employed Receipt For: Primary Ger Other (specify) Full Name (Last, First, Midd John P Bender Mailing Address 116 Bel City Wilton FEC ID number of contribut federal political committee.			Date of Receipt
Wilton FEC ID number of contribut federal political committee. Name of Employer Self-Employed Receipt For: Primary Ger Other (specify) ▼ Full Name (Last, First, Midd John P Bender Mailing Address 116 Bel City Wilton FEC ID number of contribut federal political committee.	lden Hill Road		09 15 2009
FEC ID number of contribut federal political committee. Name of Employer Self-Employed Receipt For: Primary Ger Other (specify) Full Name (Last, First, Midd John P Bender Mailing Address 116 Bel City Wilton FEC ID number of contribut federal political committee.	State CT	e Zip Code 06897-2911	Transaction ID: 20090921-48-16-16 Amount of Each Receipt this Period
Receipt For: Primary Other (specify) Full Name (Last, First, Midd John P Bender Mailing Address 116 Bell City Wilton FEC ID number of contribut federal political committee.		00037 2311	50.00
Full Name (Last, First, Midd John P Bender Mailing Address 116 Bel City Wilton FEC ID number of contribut federal political committee.	Occup Gene	oation ral Insurance Agent	7
C. John P Bender Mailing Address 116 Bel City Wilton FEC ID number of contribut federal political committee.	Aggre	gate Year-to-Date ▼ 1050.00	
City Wilton FEC ID number of contribut federal political committee.	dle Initial)		Date of Receipt
Wilton FEC ID number of contribut federal political committee.	lden Hill Road		09 30 YYYY 2009
federal political committee.	State CT	e Zip Code 06897-2911	Transaction ID: 20091008103448-48 Amount of Each Receipt this Period
Name of Employer	ting		50.00
Self-Employed ⁵	Occup	oation ral Insurance Agent	
Receipt For: Primary Ger Other (specify) ▼	I delle	gate Year-to-Date ▼ 1050.00	
SUBTOTAL of Receipts This		0 0 0 0 0 0 0 0	

SCHEDULE A (FEC I	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 574 (check only one) X
Any information copied from such or for commercial purposes, other NAME OF COMMITTEE (In It The Northwestern Mutual	r than using the name and a -ull)	ddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle John P Bender	,		Date of Receipt
Mailing Address 116 Beld	en Hill Road State	Zip Code	10 15 2009 Transaction ID: 2009102293957-48
Wilton	CT	06897-2911	Amount of Each Receipt this Period
FEC ID number of contributin federal political committee.	g C		50.00
Name of Employer Self-Employed	Occupati Genera	ion I Insurance Agent	
Receipt For: Primary General Other (specify) ▼		tte Year-to-Date ▼ 1050.00]
Full Name (Last, First, Middle John P Bender	,		Date of Receipt
Mailing Address 116 Beld	en Hill Road		10 31 2009
City	State	Zip Code	Transaction ID: 20091105152043-48
Wilton	CT	06897-2911	Amount of Each Receipt this Period
FEC ID number of contributin federal political committee.	C		50.00
Name of Employer Self-Employed		l Insurance Agent	
Receipt For: Primary General Other (specify) ▼		te Year-to-Date ▼ 1050.00]
Full Name (Last, First, Middle John P Bender	Initial)		Date of Receipt
Mailing Address 116 Beld	en Hill Road		1 1 1 5 2 0 0 9
City	State	Zip Code	Transaction ID: 20091118163132-48
Wilton	CT	06897-2911	Amount of Each Receipt this Period
FEC ID number of contributin federal political committee.	C		50.00
Name of Employer Self-Employed		I Insurance Agent	
Receipt For: Primary General Other (specify) ▼		te Year-to-Date ▼ 1050.00]
SUBTOTAL of Receipts This P	age (optional)		150.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 574 (check only one) X 11a
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements ma e name and ad	up not be sold or used by any perso dress of any political committee to	
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ce Company	/ Federal PAC	
	Full Name (Last, First, Middle Initial) Beth M. Berger			Date of Receipt
	Mailing Address 4141 N Murray Avenu	е		07 15 2009
	City	State	Zip Code	Transaction ID: 20090720-568-13-0
	Shorewood	WI	53211-2011	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer NML	Occupation Asst Gc	& Asst Sec	
	Receipt For:	+ +	e Year-to-Date ▼	
	Primary General Other (specify) ▼		546.00	
_	Full Name (Last, First, Middle Initial) Beth M. Berger			Date of Receipt
	Mailing Address 4141 N Murray Avenu	е		07 31 2009
	City	State	Zip Code	Transaction ID: 20090804-568-10-0
	Shorewood	WI	53211-2011	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer NML	Occupation Asst Gc	on & Asst Sec	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		546.00	
_	Full Name (Last, First, Middle Initial) Beth M. Berger			Date of Receipt
	Mailing Address 4141 N Murray Avenu	е		08 15 2009
	City	State	Zip Code	Transaction ID: 20090819-636-14-15
	Shorewood	WI	53211-2011	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer NML	Occupation Asst Gc	& Asst Sec	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		546.00	
		1		

	OULE A (FEC Form 3X) ED RECEIPTS	Use separate s for each catego Detailed Sumn	ory of the	FOR LINE NUMBER: PAGE 34 / 574 (check only one) X 11a 11b 11c 12
Any inform or for com	nation copied from such Reports and mercial purposes, other than using the	Statements may not be sold or us e name and address of any politic	ed by any person for all committee to so	13 14 15 16 1 1 15 16 1 1 1 1 1 1 1 1
\	OF COMMITTEE (In Full) orthwestern Mutual Life Insura	nce Company Federal PAC		
Full Nai Beth M.	me (Last, First, Middle Initial) Berger			Date of Receipt
Mailing	Address 4141 N Murray Aven	le		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
City		State Zip Code		Transaction ID: 20090902-636-15-1
<u>Shore</u>	wood	WI 53211-2011		Amount of Each Receipt this Period
	number of contributing political committee.	С		30.00
Name o	of Employer	Occupation Asst Gc & Asst Sec		
	t For: rimary General bther (specify) ▼	Aggregate Year-to-Date ▼	546.00	
Full Na	me (Last, First, Middle Initial) Berger			Date of Receipt
	Address 4141 N Murray Aven	ue		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State Zip Code		Transaction ID: 20090921-634-17-1
Shore	wood	WI 53211-2011		Amount of Each Receipt this Period
	number of contributing political committee.	C	0	30.00
Name o NML	of Employer	Occupation Asst Gc & Asst Sec		
Receipt		Aggregate Year-to-Date ▼		
	rimary General other (specify) ▼	0 0 0 0 0	546.00	
Full Nai Beth M.	me (Last, First, Middle Initial) Berger	.1		Date of Receipt
Mailing	Address 4141 N Murray Aven	ue		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State Zip Code		Transaction ID: 20091008104013-56
Shore	wood	WI 53211-2011		Amount of Each Receipt this Period
	number of contributing political committee.	C	0	30.00
Name o	of Employer	Occupation Asst Gc & Asst Sec		
Receipt		Aggregate Year-to-Date ▼		
	rimary General other (specify) ♥		546.00	
	All of Descriptor This Days (settings)	1		90.00

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate sched for each category of Detailed Summary F	the (crieck only only)
r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	ne name and address of any political cor	any person for the purpose of soliciting contributions nmittee to solicit contributions from such committee.
The Northwestern Mutual Life Insura	nce Company Federal PAC	
Full Name (Last, First, Middle Initial) Beth M. Berger Mailing Address 4141 N Murray Aven		Date of Receipt
	ue	10 15 2009
City	State Zip Code	Transaction ID: 20091015164625-5
Shorewood	WI 53211-2011	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer NML	Occupation Asst Gc & Asst Sec	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	540	6.00
Full Name (Last, First, Middle Initial) Beth M. Berger		Date of Receipt
Mailing Address 4141 N Murray Aven	ue	10 31 2009
City	State Zip Code	Transaction ID: 20091105152628-5
Shorewood	WI 53211-2011	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer NML	Occupation Asst Gc & Asst Sec	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	540	6.00
Full Name (Last, First, Middle Initial) Beth M. Berger		Date of Receipt
Mailing Address 4141 N Murray Aven	ue	1 1 1 5 2 0 0 9
City	State Zip Code	Transaction ID: 2009111816423-56
Shorewood	WI 53211-2011	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer NML	Occupation Asst Gc & Asst Sec	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	541	6.00
SUBTOTAL of Receipts This Page (optional)		90.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate sche for each category of Detailed Summary	of the Check only one)
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	ne name and address of any political c	by any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Frederick W. Bessette Mailing Address N43 W33223 Glen F	arc	Date of Receipt
City Nashotah FEC ID number of contributing	State Zip Code WI 53058	1 1 1 5 2 0 0 9 Transaction ID: 2009111816423-520 Amount of Each Receipt this Period 11.00
Receipt For: Primary Other (specify)	Occupation Asst Gc & Asst Sec Aggregate Year-to-Date 2	07.00
Full Name (Last, First, Middle Initial) Mark S. Bishop Mailing Address 1140 Burnet Street		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Brookfield FEC ID number of contributing federal political committee.	State Zip Code WI 53005-6835	Transaction ID: 20090720-1025-13-0 Amount of Each Receipt this Period 25.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation Rvp Fld Supv Aggregate Year-to-Date ▼	09.00
Full Name (Last, First, Middle Initial) Mark S. Bishop Mailing Address 1140 Burnet Street	0 0 0 0 0 0	Date of Receipt
City Brookfield FEC ID number of contributing federal political committee.	State Zip Code WI 53005-6835	0 7 3 1 2 0 0 9 Transaction ID: 20090804-1023-10-0 Amount of Each Receipt this Period 25.00
Name of Employer NML Receipt For: Primary Other (specify)	Occupation Rvp Fld Supv Aggregate Year-to-Date 6	09.00
SUBTOTAL of Receipts This Page (optional)		61.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	24-4	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 574 (check only one) X 11a
\ \	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and ad	ldress of any political committee t	o solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Mark S. Bishop Mailing Address 1140 Burnet Street			Date of Receipt
	Mailing Address 1140 Burnet Street City Brookfield	State WI	Zip Code 53005-6835	M M M 15 20090 15 20090 Transaction ID: 20090819-1090-14-15 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation Rvp Fld Aggregate		
В.	Full Name (Last, First, Middle Initial) Mark S. Bishop Mailing Address 1140 Burnet Street	Date of Receipt 0 8		
	City Brookfield FEC ID number of contributing	State WI	Zip Code 53005-6835	Transaction ID: 20090902-1090-15-1 Amount of Each Receipt this Period 25.00
	federal political committee. Name of Employer NML	Occupation Rvp Fld		23.00
	Receipt For: Primary General Other (specify) ▼	, '	e Year-to-Date ▼ 609.00	
C.	Full Name (Last, First, Middle Initial) Mark S. Bishop Mailing Address 1140 Burnet Street	Date of Receipt 0 9 1 5 2 0 0 9		
	City	State	Zip Code	Transaction ID: 20090921-1082-17-1
	Brookfield FEC ID number of contributing federal political committee.	C	53005-6835	Amount of Each Receipt this Period 25.00
	Name of Employer NML	Occupation Rvp Fld		
	Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	, ' ' ' 	e Year-to-Date ▼ 609.00	
	SUBTOTAL of Receipts This Page (optional) .			75.00
	TOTAL This Period (last page this line number	r onlv)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 574 (check only one) X 11a
,	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar			
Α.	Full Name (Last, First, Middle Initial) Mark S. Bishop			Date of Receipt
	Mailing Address 1140 Burnet Street	09 30 2009		
	City	State	Zip Code	Transaction ID: 20091008104013-1008
	Brookfield	WI	53005-6835	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer NML	Occupation Rvp Fld		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		609.00	
– В.	Full Name (Last, First, Middle Initial) Mark S. Bishop	Date of Receipt		
	Mailing Address 1140 Burnet Street	10 15 2009		
	City	State	Zip Code	Transaction ID: 20091015164625-1007
	Brookfield	WI	53005-6835	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer NML	Occupation Rvp Fld	Supv	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		609.00	
с. С.	Full Name (Last, First, Middle Initial) Mark S. Bishop	Date of Receipt		
	Mailing Address 1140 Burnet Street	10 31 2009		
	City	State	Zip Code	Transaction ID: 20091105152628-1007
	Brookfield	WI	53005-6835	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer NML Occupation Rvp Fld S			25.00
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	609.00	
ſ	SUBTOTAL of Receipts This Page (optional) .			75.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Κ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39/5/4 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	rance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Mark S. Bishop			Date of Receipt
Mailing Address 1140 Burnet Street	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Brookfield	State WI	Zip Code 53005-6835	Transaction ID: 2009111816423-100 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer NML	Occupatio Rvp Fld		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 609.00	
Full Name (Last, First, Middle Initial) Dwaan C Black			Date of Receipt
Mailing Address 3520 Dumbarton D	0 7 1 5 2 0 0 9		
City Atlanta	State GA	Zip Code 30327-2614	Transaction ID: 20090720-1218-13- Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.			42.00
Name of Employer NML	Name of Employer Occupation Special A		
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 882.00	
Full Name (Last, First, Middle Initial) Dwaan C Black			Date of Receipt
Mailing Address 3520 Dumbarton D	07 31 2009		
City Atlanta	State GA	Zip Code 30327-2614	Transaction ID: 20090804-1215-10- Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer NML Occupation Special A		00027 2014	42.00
Receipt For: ☐ Primary ☐ General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 882.00	
SUBTOTAL of Receipts This Page (optional	al)		109.00

Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance Pull Name (Last, First, Middle Initial) Dwaan C Black Mailing Address 3520 Dumbarton D City Atlanta FEC ID number of contributing federal political committee. Name of Employer NML	State Zip Code GA 30327-2614 C Occupation Special Agent	Date of Receipt Date of Receipt			
Full Name (Last, First, Middle Initial) Dwaan C Black Mailing Address 3520 Dumbarton D City Atlanta FEC ID number of contributing federal political committee.	State Zip Code GA 30327-2614 C Occupation Special Agent	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City Atlanta FEC ID number of contributing federal political committee.	State Zip Code GA 30327-2614 C Occupation Special Agent	Transaction ID: 20090819-40-14-0 Amount of Each Receipt this Period			
Atlanta FEC ID number of contributing federal political committee.	GA 30327-2614 C Occupation Special Agent	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	Occupation Special Agent				
Name of Employer NML	Special Agent	-			
	_ <u> </u>				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 882.00				
Full Name (Last, First, Middle Initial) Dwaan C Black Mailing Address 3520 Dumbarton D	Date of Receipt				
City	0 8 3 1 2 0 0 9 Transaction ID: 20090902-40-14-46				
Atlanta	State Zip Code GA 30327-2614	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	42.00			
Name of Employer NML	Occupation Special Agent				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 882.00				
Full Name (Last, First, Middle Initial) Dwaan C Black		Date of Receipt			
Mailing Address 3520 Dumbarton D					
City	State Zip Code	0 9 1 5 2 0 0 9 Transaction ID: 20090921-41-16-16			
Atlanta FEC ID number of contributing federal political committee.	GA 30327-2614	Amount of Each Receipt this Period 42.00			
Name of Employer NML	Occupation Special Agent				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼				
SUBTOTAL of Receipts This Page (optional	al)	126.00			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17		
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company Federal PAC			
Full Name (Last, First, Middle Initial) A. Dwaan C Black		Date of Receipt		
Mailing Address 3520 Dumbarton Driv	09 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City Atlanta	State Zip Code GA 30327-2614	Transaction ID: 20091008103448-41 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C 30327-2014	42.00		
Name of Employer NML	Occupation Special Agent			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 882.00			
Full Name (Last, First, Middle Initial) Dwaan C Black		Date of Receipt		
Mailing Address 3520 Dumbarton Driv	Mailing Address 3520 Dumbarton Drive			
City	State Zip Code	1 0 1 5 2 0 0 9 Transaction ID: 2009102293957-41		
<u>Atlanta</u>	GA 30327-2614	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	42.00		
Name of Employer NML	Occupation Special Agent			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 882.00			
Full Name (Last, First, Middle Initial)		Date of Receipt		
	Dwaan C Black Mailing Address 3520 Dumbarton Drive			
City	State Zip Code	1 0 3 1 2 0 0 9 Transaction ID: 20091105152043-41		
<u>Atlanta</u>	GA 30327-2614	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	42.00		
Name of Employer NML	Occupation Special Agent			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 882.00			
SUBTOTAL of Receipts This Page (optional)		126.00		
TOTAL This Period (last page this line numbe	·			

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 574 (check only one) X
\	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	name and add	lress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ 4.	Full Name (Last, First, Middle Initial) Dwaan C Black			Date of Receipt
	Mailing Address 3520 Dumbarton Drive City	State	Zip Code	1 1 1 5 20001118163133 41
	Atlanta	GA	30327-2614	Transaction ID: 20091118163132-41 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33027 2011	42.00
	Name of Employer NML	Occupation Special A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 882.00	
_ 3.	Full Name (Last, First, Middle Initial) Garrett J Bleakley Mailing Address 5460 Chelsea Avenue			Date of Receipt
				07 15 2009
	City La Jolla	State CA	Zip Code 92037-7607	Transaction ID: 20090720-1197-13-1
	FEC ID number of contributing federal political committee.	C	92037-7607	Amount of Each Receipt this Period 25.00
	Name of Employer Self-Employed	Occupation General I	n nsurance Agent	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 525.00	
- ;.	Full Name (Last, First, Middle Initial) Garrett J Bleakley Mailing Address 5460 Chelsea Avenue			Date of Receipt
	City	State	Zip Code	0 7 3 1 2 0 0 9 Transaction ID: 20090804-1195-10-0
	<u>La Jolla</u>	CA	92037-7607	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer Self-Employed	Occupation General I	n nsurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 525.00	
	SUBTOTAL of Receipts This Page (optional)			92.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A 0	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma ne name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insura	nce Company	/ Federal PAC	
	Full Name (Last, First, Middle Initial) Garrett J Bleakley Mailing Address 5460 Chelsea Avenue			Date of Receipt
	Mailing Address 5460 Chelsea Avenue	08 / 15 / 2009		
	City	State	Zip Code	Transaction ID: 20090819-20-14-0
	<u>La Jolla</u>	CA	92037-7607	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer Self-Employed	Occupation General	n Insurance Agent	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		525.00	
_	Full Name (Last, First, Middle Initial) Garrett J Bleakley	Date of Receipt		
	Mailing Address 5460 Chelsea Avenue	08 / 01 / 1 2009		
	City	State	Zip Code	Transaction ID: 20090902-20-14-46
	<u>La Jolla</u>	CA	92037-7607	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			25.00
	Name of Employer Self-Employed	Occupation General	n Insurance Agent	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		525.00	
	Full Name (Last, First, Middle Initial) Garrett J Bleakley			Date of Receipt
	Mailing Address 5460 Chelsea Avenue	09 15 2009		
	City	State	Zip Code	Transaction ID: 20090921-20-16-16
	La Jolla	CA	92037-7607	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			25.00
	Name of Employer Self-Employed		Insurance Agent	
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼		525.00	
Г	SUBTOTAL of Receipts This Page (optional)			75.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16	
NAME OF COMMITTEE (In Full)	rts and Statements may not be sold or used by any perso using the name and address of any political committee to nsurance Company Federal PAC		
Full Name (Last, First, Middle Initial) Garrett J Bleakley Mailing Address 5460 Chelsea	Avenue	Date of Receipt 0 9 3 0 2 0 0 9	
City La Jolla	State Zip Code CA 92037-7607	Transaction ID: 20091008103448-20 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee. Name of Employer Self-Employed	Occupation General Insurance Agent	25.00	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00		
Full Name (Last, First, Middle Initial) Garrett J Bleakley Mailing Address 5460 Chelsea	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y		
City	State Zip Code	Transaction ID: 2009102293957-20	
<u>La Jolla</u>	CA 92037-7607	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	25.00	
Name of Employer Self-Employed	Occupation General Insurance Agent		
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 525.00		
Full Name (Last, First, Middle Initial) Garrett J Bleakley	I	Date of Receipt	
	•		
City	State Zip Code	1 0 3 1 2 0 0 9 Transaction ID: 20091105152043-20	
La Jolla FEC ID number of contributing federal political committee.	CA 92037-7607	Amount of Each Receipt this Period 25.00	
Name of Employer Self-Employed	Occupation General Insurance Agent		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00		
SUBTOTAL of Receipts This Page (or	otional)	75.00	

Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	I Statements may not be sold or used by any perso	13 14 15 16 1
The Northwestern Mutual Life Insura		on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Garrett J Bleakley Mailing Address 5460 Chelsea Avenu		Date of Receipt
City <u>La Jolla</u> FEC ID number of contributing	State Zip Code CA 92037-7607	Transaction ID: 20091118163132-20 Amount of Each Receipt this Period
federal political committee. Name of Employer Self-Employed	Occupation General Insurance Agent	25.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00]
Full Name (Last, First, Middle Initial) Deborah S. Bletzinger Mailing Address 3146 South 29th Stre	Date of Receipt 1 0 1 5 2 0 0 9	
City	State Zip Code	Transaction ID: 20091015164625-957
Milwaukee	WI 53215	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	12.00
Name of Employer NML	Occupation Assistant Med Dir	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 228.00	
Full Name (Last, First, Middle Initial) Deborah S. Bletzinger Mailing Address 3146 South 29th Stre	Date of Receipt 1 0 3 1 2 0 0 9	
City	State Zip Code	Transaction ID: 20091105152628-957
Milwaukee FEC ID number of contributing federal political committee.	WI 53215	Amount of Each Receipt this Period 12.00
Name of Employer NML	Occupation Assistant Med Dir	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 228.00	
SUBTOTAL of Receipts This Page (optional)		49.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 574 (check only one) X
Any information copied from such Reports and Stror for commercial purposes, other than using the INAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Deborah S. Bletzinger Mailing Address 3146 South 29th Stre			Date of Receipt
City Milwaukee FEC ID number of contributing	State WI	Zip Code 53215	Transaction ID: 2009111816423-957 Amount of Each Receipt this Period 12.00
Receipt For: Primary Other (specify)	Occupation Assistant]
Full Name (Last, First, Middle Initial) Debra Blevons Wascher Mailing Address 165 S Pine Court	Date of Receipt 0 7		
City Appleton FEC ID number of contributing federal political committee.	State Zip Code WI 54914-8222		Transaction ID: 20090720-1245-13-1 Amount of Each Receipt this Period 42.00
Name of Employer Debra Blevons Agy LLC Receipt For: Primary Other (specify)	Occupation Special A		
Full Name (Last, First, Middle Initial) Debra Blevons Wascher Mailing Address 165 S Pine Court	Debra Blevons Wascher		
City Appleton FEC ID number of contributing federal political committee.	State WI	Zip Code 54914-8222	Transaction ID: 20090804-1242-10-0 Amount of Each Receipt this Period 42.00
Name of Employer Debra Blevons Agy LLC Receipt For:	Occupation Special A Aggregate		
Primary General Other (specify) ▼	0 0	882.00	
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number of		•	96.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47/5/4 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	ance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Debra Blevons Wascher			Date of Receipt
Mailing Address 165 S Pine Court	08 15 2009		
City Appleton	State WI	Zip Code 54914-8222	Transaction ID: 20090819-67-14-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer Debra Blevons Agy LLC	Occupatio Special A		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 882.00	
Full Name (Last, First, Middle Initial) Debra Blevons Wascher	I		Date of Receipt
Mailing Address 165 S Pine Court	0 8 3 1 Y Y Y Y Y		
City Appleton	State WI	Zip Code 54914-8222	Transaction ID: 20090902-67-14-46 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.			42.00
Name of Employer Debra Blevons Agy LLC	Occupatio Special A		
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 882.00	
Full Name (Last, First, Middle Initial) Debra Blevons Wascher			Date of Receipt
Mailing Address 165 S Pine Court	0 9 1 5 2 0 0 9		
City Appleton	State WI	Zip Code 54914-8222	Transaction ID: 20090921-73-16-16
FEC ID number of contributing federal political committee. Name of Employer Debra Blevons Agy LLC Occupation Special A		34314-0222	Amount of Each Receipt this Period 42.00
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 882.00	
SUBTOTAL of Receipts This Page (optional	ıl)		126.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 574 (check only one) X
,	ny information copied from such Reports and r for commercial purposes, other than using the	Statements mane name and add	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	nce Company	/ Federal PAC	
۸.	Full Name (Last, First, Middle Initial) Debra Blevons Wascher			Date of Receipt
	Mailing Address 165 S Pine Court	09 30 2009		
	City <u>Appleton</u>	State WI	Zip Code 54914-8222	Transaction ID: 20091008103448-73 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Debra Blevons Agy LLC	Occupation Special A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 882.00	
	Full Name (Last, First, Middle Initial) Debra Blevons Wascher			Date of Receipt
	Mailing Address 165 S Pine Court			10 15 2009
	City	State	Zip Code	Transaction ID: 2009102293957-73
	Appleton	WI	54914-8222	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			42.00
	Name of Employer Debra Blevons Agy LLC	Occupation Special A		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		882.00	
_	Full Name (Last, First, Middle Initial) Debra Blevons Wascher	Date of Receipt		
	Mailing Address 165 S Pine Court	10 31 2009		
	City	State	Zip Code	Transaction ID: 20091105152043-73
	Appleton	WI	54914-8222	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Debra Blevons Agy LLC Special Ag			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 882.00	
	SUBTOTAL of Receipts This Page (optional)			126.00

Dobra Blayone Nay LLC	me and address of any political committee to s	Date of Receipt Transaction ID: 20091118163132-73
Full Name (Last, First, Middle Initial) Debra Blevons Wascher Mailing Address 165 S Pine Court City Appleton FEC ID number of contributing federal political committee. Name of Employer Debra Blevons Agy LLC Receipt For:	State Zip Code WI 54914-8222 C Occupation Special Agent Aggregate Year-to-Date ▼	1 1 1 5 2 0 0 9 Transaction ID: 20091118163132-73 Amount of Each Receipt this Period
City Appleton FEC ID number of contributing federal political committee. Name of Employer Debra Blevons Agy LLC Receipt For:	WI 54914-8222 C Occupation Special Agent Aggregate Year-to-Date ▼	1 1 1 5 2 0 0 9 Transaction ID: 20091118163132-73 Amount of Each Receipt this Period
federal political committee. Name of Employer Debra Blevons Agy LLC Receipt For:	Occupation Special Agent Aggregate Year-to-Date ▼	-
Other (specify) ▼		
Full Name (Last, First, Middle Initial) Timothy J Bohannon Mailing Address 8677 Alvarado Court		Date of Receipt 0 7 1 5 2 0 0 9
City Inver Grove FEC ID number of contributing federal political committee.	State Zip Code MN 55077-3121	Transaction ID: 20090720-1199-13-1 Amount of Each Receipt this Period 208.00
Solf Employed	Occupation General Insurance Agent Aggregate Year-to-Date ▼ 4368.00	
Full Name (Last, First, Middle Initial) Timothy J Bohannon Mailing Address 8677 Alvarado Court		Date of Receipt 0 7 3 1 2 0 0 9
City Inver Grove FEC ID number of contributing	State Zip Code MN 55077-3121	Transaction ID: 20090804-1197-10-0 Amount of Each Receipt this Period 208.00
Colf Employed	Occupation General Insurance Agent	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4368.00	
SUBTOTAL of Receipts This Page (optional)	>	458.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate sched for each category of Detailed Summary F	the Circuit only one)
	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insural	e name and address of any political co	vany person for the purpose of soliciting contributions mmittee to solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Timothy J Bohannon Mailing Address 8677 Alvarado Court		Date of Receipt
			08 15 2009
	City	State Zip Code	Transaction ID: 20090819-22-14-0
	Inver Grove	MN 55077-3121	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	208.00
	Name of Employer Self-Employed	Occupation General Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 436	8.00
_	Full Name (Last, First, Middle Initial) Timothy J Bohannon		Date of Receipt
	Mailing Address 8677 Alvarado Court	08 / 01 / 2009	
	City	State Zip Code	Transaction ID: 20090902-22-14-46
	Inver Grove FEC ID number of contributing	MN 55077-3121	Amount of Each Receipt this Period 208.00
	federal political committee.		
	Name of Employer Self-Employed	Occupation General Insurance Agent	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	436	8.00
_	Full Name (Last, First, Middle Initial) Timothy J Bohannon	<u> </u>	Date of Receipt
	Mailing Address 8677 Alvarado Court		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 20090921-22-16-16
	Inver Grove	MN 55077-3121	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	208.00
	Name of Employer Self-Employed	Occupation General Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 436	8.00
	SURTOTAL of Receipts This Page (optional)		624.00

	LE A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 574 (check only one) X
NAME OF	COMMITTEE (In Full)			on for the purpose of soliciting contributions o solicit contributions from such committee.
	nwestern Mutual Life Insuran	ice Company	Federal PAC	
Timothy J B	(Last, First, Middle Initial) ohannon dress 8677 Alvarado Court			Date of Receipt
	1003 0077 Alvarado Court			09 30 2009
City <u>Inver Gro</u>	ve	State MN	Zip Code 55077-3121	Transaction ID: 20091008103448-22 Amount of Each Receipt this Period
	mber of contributing ical committee.	C		208.00
Name of Er Self-Emplo	nployer yed	Occupatio General	n Insurance Agent	
Receipt For Prima Other		Aggregate	Year-to-Date ▼ 4368.00	
Full Name ((Last, First, Middle Initial) ohannon			Date of Receipt
Mailing Add	dress 8677 Alvarado Court	10 15 2009		
City		State	Zip Code	Transaction ID: 2009102293957-22
	Inver Grove MN FEC ID number of contributing federal political committee. C		55077-3121	Amount of Each Receipt this Period
				208.00
Name of Er Self-Emplo	mployer yed	Occupatio General	n Insurance Agent	
Receipt For		_ '	Year-to-Date ▼	
Prima Other	ary General r (specify) ♥		4368.00]
Full Name ((Last, First, Middle Initial) ohannon			Date of Receipt
Mailing Add	dress 8677 Alvarado Court			10 31 2009
City		State	Zip Code	Transaction ID: 20091105152043-22
	nber of contributing ical committee.	C	55077-3121	Amount of Each Receipt this Period 208.00
Name of Er Self-Emplo	nployer yed	Occupatio General	n Insurance Agent	
Receipt For Prima Other		, '	Year-to-Date ▼ 4368.00	
		1		624.00

SCHEDULE A (FECFITEMIZED RECEIPTS	2 Separate soriedate(s)	FOR LINE NUMBER: PAGE 52 / 574 (check only one) X		
Any information copied from such or for commercial purposes, other	Reports and Statements may not be sold or used by any per than using the name and address of any political committee			
NAME OF COMMITTEE (In Fi	Life Insurance Company Federal PAC			
Full Name (Last, First, Middle I Timothy J Bohannon	nitial)	Date of Receipt		
Mailing Address 8677 Alva		11 15 2009		
City	State Zip Code	Transaction ID: 20091118163132-22		
Inver Grove	MN 55077-3121	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	208.00		
Name of Employer Self-Employed	Occupation General Insurance Agent			
Receipt For: Primary Genera Other (specify) ▼	Aggregate Year-to-Date ▼ 4368.00			
Full Name (Last, First, Middle I David G Bostick	nitial)	Date of Receipt		
Mailing Address 5808 Pine				
City	State Zip Code	Transaction ID: 20090720-1210-13-1		
Flower Mound	TX 75022-6506	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	125.00		
Name of Employer Self-Employed	Occupation General Insurance Agent			
Receipt For:	Aggregate Year-to-Date ▼			
Primary Genera Other (specify) ▼	2625.00			
Full Name (Last, First, Middle I David G Bostick	nitial)	Date of Receipt		
Mailing Address 5808 Pine	Valley Drive	07 31 YYYY 2009		
City	State Zip Code	Transaction ID: 20090804-1207-10-0		
Flower Mound	TX 75022-6506	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	125.00		
Name of Employer Self-Employed	Occupation General Insurance Agent			
Receipt For: Primary Genera	Aggregate Year-to-Date ▼ 2625.00			
Other (specify)	2025.00			
CURTOTAL (D TI: D	ge (optional)	458.00		

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 574 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura			
7 The Northwestern Mutual Life insura	ance Company	Tederal I AO	
Full Name (Last, First, Middle Initial) David G Bostick Mailing Address 5808 Pine Valley Dri			Date of Receipt
Mailing Address 5808 Pine Valley Dri	ve		08 15 2009
City	State	Zip Code	Transaction ID: 20090819-32-14-0
Flower Mound	TX	75022-6506	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer Self-Employed	Occupation General I	n nsurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2625.00	
Full Name (Last, First, Middle Initial) David G Bostick			Date of Receipt
Mailing Address 5808 Pine Valley Dri	ve		08 31 2009
City	State	Zip Code	Transaction ID: 20090902-32-14-46
Flower Mound	TX	75022-6506	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer Self-Employed	Occupation General I	n nsurance Agent	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	2625.00	
Full Name (Last, First, Middle Initial) David G Bostick			Date of Receipt
Mailing Address 5808 Pine Valley Dri	ve		09 15 2009
City	State	Zip Code	Transaction ID: 20090921-32-16-16
Flower Mound	TX	75022-6506	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer Self-Employed	Occupation General I	n nsurance Agent	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	2625.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>		375.00

[]	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 574 (check only one) X
0	any information copied from such Reports and St r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) David G Bostick Mailing Address 5808 Pine Valley Drive City Flower Mound FEC ID number of contributing	State TX	Zip Code 75022-6506	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Receipt For: Primary Other (specify) ▼	Occupatio General	Insurance Agent e Year-to-Date 2625.00	
— В.	Full Name (Last, First, Middle Initial) David G Bostick Mailing Address 5808 Pine Valley Drive City Flower Mound	State TX	Zip Code 75022-6506	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: □ Primary □ General □ Other (specify) ▼		Insurance Agent e Year-to-Date ✓ 2625.00	125.00
 C.	Full Name (Last, First, Middle Initial) David G Bostick Mailing Address 5808 Pine Valley Drive City Flower Mound FEC ID number of contributing federal political committee. Name of Employer Self-Employed	State TX C		Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Г	Receipt For: Primary General Other (specify) ▼		Insurance Agent e Year-to-Date ▼ 2625.00	
	SUBTOTAL of Receipts This Page (optional) FOTAL This Period (last page this line number of			375.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 11
, c	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any pe le name and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
	The Northwestern Mutual Life Insural	nce Company Federal PAC	
۸.	Full Name (Last, First, Middle Initial) David G Bostick	Date of Receipt	
	Mailing Address 5808 Pine Valley Driv		111 / 15 / 2009
	City Flower Mound	State Zip Code TX 75022-6506	Transaction ID: 20091118163132-32 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	125.00
	Name of Employer Self-Employed	Occupation General Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2625.00	
 3.	Full Name (Last, First, Middle Initial) Sandra L. Botcher	Date of Receipt	
	Mailing Address 15375 Kata Drive	07 15 2009	
	City	State Zip Code	Transaction ID: 20090720-859-13-0
	Elm Grove FEC ID number of contributing federal political committee.	WI 53122-1028	Amount of Each Receipt this Period 24.00
	Name of Employer NML	Occupation VP-Era	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 432.00	
. –	Full Name (Last, First, Middle Initial) Sandra L. Botcher	Date of Receipt	
	Mailing Address 15375 Kata Drive	07 31 2009	
	City Elm Grove	State Zip Code WI 53122-1028	Transaction ID: 20090804-858-10-0
	FEC ID number of contributing federal political committee.	C 33122-1026	Amount of Each Receipt this Period 24.00
	Name of Employer NML	Occupation VP-Era	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 432.00	
	SUBTOTAL of Receipts This Page (optional)		173.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personal ename and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
The Northwestern Mutual Life Insurar	nce Company Federal PAC	
Full Name (Last, First, Middle Initial) Sandra L. Botcher		Date of Receipt
Mailing Address 15375 Kata Drive	Ctata 7ia Cada	08 15 2009
City <u>Elm Grove</u>	State Zip Code WI 53122-1028	Transaction ID: 20090819-925-14-15 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	24.00
Name of Employer NML	Occupation VP-Era	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 432.00	
Full Name (Last, First, Middle Initial) Sandra L. Botcher		Date of Receipt
Mailing Address 15375 Kata Drive		08 31 2009
City	State Zip Code	Transaction ID: 20090902-925-15-1
Elm Grove FEC ID number of contributing federal political committee.	WI 53122-1028	Amount of Each Receipt this Period 24.00
Name of Employer NML	Occupation VP-Era	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 432.00	
Full Name (Last, First, Middle Initial) Sandra L. Botcher		Date of Receipt
Mailing Address 15375 Kata Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20090921-920-17-1
Elm Grove FEC ID number of contributing federal political committee.	WI 53122-1028	Amount of Each Receipt this Period 24.00
Name of Employer NML	Occupation VP-Era	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 432.00	
SUBTOTAL of Receipts This Page (optional) .		72.00
TOTAL This Period (last page this line numbe	·	

ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 15 16 1 1 1 1 1 1 1 1
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	ance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Sandra L. Botcher			Date of Receipt
Mailing Address 15375 Kata Drive	09 30 YYYY 2009		
City Elm Grove	State WI	Zip Code 53122-1028	Transaction ID: 20091008104013-847 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		24.00
Name of Employer NML	Occupatio VP-Era	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 432.00	
Full Name (Last, First, Middle Initial) Sandra L. Botcher			Date of Receipt
Mailing Address 15375 Kata Drive	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Elm Grove	State WI	Zip Code 53122-1028	Transaction ID: 20091015164625-846 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		24.00
Name of Employer NML	Occupatio VP-Era	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 432.00	
Full Name (Last, First, Middle Initial) Sandra L. Botcher			Date of Receipt
Mailing Address 15375 Kata Drive			10 31 2009
City Elm Grove	State WI	Zip Code 53122-1028	Transaction ID: 20091105152628-846
FEC ID number of contributing federal political committee.	C	33122-1020	Amount of Each Receipt this Period 24.00
Name of Employer NML	Occupatio VP-Era	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 432.00	
SUBTOTAL of Receipts This Page (optional	l)		72.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A or	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements mand and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insural	nce Company	Federal PAC	
٠.	Full Name (Last, First, Middle Initial) Sandra L. Botcher			Date of Receipt
	Mailing Address 15375 Kata Drive		7: 0 !	11 15 2009
	City Elm Grove	State WI	Zip Code 53122-1028	Transaction ID: 2009111816423-846 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		24.00
	Name of Employer NML	Occupatio VP-Era	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 432.00	
	Full Name (Last, First, Middle Initial) Mark C. Boyle	Date of Receipt		
	Mailing Address 720 E Wisconsin Ave	07 15 2009		
	City	Zip Code	Transaction ID: 20090720-875-13-0	
	Milwaukee	WI	53202-4703	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer NML	Occupatio Director	n	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		525.00	
	Full Name (Last, First, Middle Initial) Mark C. Boyle			Date of Receipt
	Mailing Address 720 E Wisconsin Avenue			07
	City Milwaukee	State W1	Zip Code 53202-4703	Transaction ID: 20090804-873-10-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33202-4703	25.00
	Name of Employer NML	Occupatio Director	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 525.00	
	SUBTOTAL of Receipts This Page (optional)			74.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A 0	ny information copied from such Reports and r for commercial purposes, other than using the	Statements ma ne name and ad	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insural	nce Company	/ Federal PAC	
∠ A.	Full Name (Last, First, Middle Initial) Mark C. Boyle			Date of Receipt
	Mailing Address 720 E Wisconsin Ave	enue		08 / 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Milwaukee	State WI	Zip Code 53202-4703	Transaction ID: 20090819-940-14-15 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer NML	Occupation Director	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 525.00	
— В.	Full Name (Last, First, Middle Initial) Mark C. Boyle Mailing Address 720 E Wisconsin Avenue			Date of Receipt
		08 31 2009		
	City Milwaukee	State WI	Zip Code 53202-4703	Transaction ID: 20090902-940-15-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer NML	Occupation Director	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 525.00	
_ C.	Full Name (Last, First, Middle Initial) Mark C. Boyle			Date of Receipt
-	Mailing Address 720 E Wisconsin Ave	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City Milwaukee	State WI	Zip Code 53202-4703	Transaction ID: 20090921-935-17-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30202 4700	25.00
	Name of Employer NML	Occupation Director	on	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 525.00	
\[\frac{1}{5}\]	SUBTOTAL of Receipts This Page (optional)			75.00
	FOTAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 60 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17	
[Any information copied from such Reports and or for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	Federal PAC		
Α.	Full Name (Last, First, Middle Initial) Mark C. Boyle			Date of Receipt	
	Mailing Address 720 E Wisconsin Ave	09 / 30 / 2009			
	City <u>Milwaukee</u>	State WI	Zip Code 53202-4703	Transaction ID: 20091008104013-862 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		25.00	
	Name of Employer NML	Occupation Director	n		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 525.00		
– В.	Full Name (Last, First, Middle Initial) Mark C. Boyle	Date of Receipt			
	Mailing Address 720 E Wisconsin Ave	10 15 2009			
	City	Transaction ID: 20091015164625-861			
	Milwaukee	WI	53202-4703	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		25.00	
	Name of Employer NML	Occupation Director	n		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		525.00		
С. С.	Full Name (Last, First, Middle Initial) Mark C. Boyle			Date of Receipt	
	Mailing Address 720 E Wisconsin Ave	-			
	City Milwaukee	State WI	Zip Code 53202-4703	Transaction ID: 20091105152628-861	
	FEC ID number of contributing federal political committee.	C	33202-4703	Amount of Each Receipt this Period 25.00	
	Name of Employer NML	Occupation Director	n		
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 525.00	1	
Γ	SUBTOTAL of Receipts This Page (optional) .			75.00	
-	TOTAL This Period (last page this line numbe		<u> </u>		

A.	rinformation copied from such Reports and or commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura Full Name (Last, First, Middle Initial) Mark C. Boyle Mailing Address 720 E Wisconsin Ave	ne name and address of any polition	sed by any person cal committee to so	for the purpose of soliciting contributions licit contributions from such committee.
A .	The Northwestern Mutual Life Insura Full Name (Last, First, Middle Initial) Mark C. Boyle Mailing Address 720 E Wisconsin Ave			
A. .	Mark C. Boyle Mailing Address 720 E Wisconsin Ave	enue		
		enue		Date of Receipt
•	City			11 15 7 2009
•	Milwaukee	State Zip Code WI 53202-4703		Transaction ID: 2009111816423-861 Amount of Each Receipt this Period
•	FEC ID number of contributing ederal political committee.	C 33202 4700		25.00
•	Name of Employer NML	Occupation Director		
•	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	525.00	
3.	Full Name (Last, First, Middle Initial) Jennifer L. Brase			Date of Receipt
	Mailing Address 12877 N Cobblestone			07 15 2009
	City	State Zip Code		Transaction ID: 20090720-895-13-0
•	Mequon FEC ID number of contributing rederal political committee.	WI 53097-1812		Amount of Each Receipt this Period 20.00
•	Name of Employer NML	Occupation Rvp Fld Supv		
•	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	420.00	
	Full Name (Last, First, Middle Initial) Jennifer L. Brase			Date of Receipt
	Mailing Address 12877 N Cobbleston)		07 31 YYYYY 2009
	City Meguon	State Zip Code WI 53097-1812		Transaction ID: 20090804-893-10-0 Amount of Each Receipt this Period
	FEC ID number of contributing rederal political committee.	C 33097-1812		20.00
	Name of Employer NML	Occupation Rvp Fld Supv		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	420.00	
SL	BTOTAL of Receipts This Page (optional)		······	65.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	d Statements may not be sold or used by any pers the name and address of any political committee t ance Company Federal PAC	son for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Jennifer L. Brase Mailing Address 12877 N Cobblestor	ne	Date of Receipt
City Mequon FEC ID number of contributing	State Zip Code WI 53097-1812	0 8 1 5 2 0 0 9 Transaction ID: 20090819-960-14-15 Amount of Each Receipt this Period
Receipt For: Primary General	Occupation Rvp Fld Supv Aggregate Year-to-Date 420.00	20.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Jennifer L. Brase Mailing Address 12877 N Cobblestor	ne	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Mequon FEC ID number of contributing federal political committee.	State Zip Code WI 53097-1812	Amount of Each Receipt this Period 20.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation Rvp Fld Supv Aggregate Year-to-Date 420.00	
Full Name (Last, First, Middle Initial) Jennifer L. Brase Mailing Address 12877 N Cobblestor	ne	Date of Receipt
City Mequon FEC ID number of contributing federal political committee.	State Zip Code WI 53097-1812 C	0 9 1 5 2 0 0 9 Transaction ID: 20090921-955-17-1 Amount of Each Receipt this Period 20.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation Rvp Fld Supv Aggregate Year-to-Date ▼ 420.00	
SUBTOTAL of Receipts This Page (optional)	60.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 574 (check only one) X
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	ce Company	Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Jennifer L. Brase			Date of Receipt
	Mailing Address 12877 N Cobblestone			09 30 2009
	City Meguon	State WI	Zip Code 53097-1812	Transaction ID: 20091008104013-882
	FEC ID number of contributing federal political committee.	C	33097-1612	Amount of Each Receipt this Period 20.00
	Name of Employer NML	Occupation Rvp Fld S		
	Receipt For: Primary General Other (specify) ▼	, ' 	e Year-to-Date ▼ 420.00	
В.	Full Name (Last, First, Middle Initial) Jennifer L. Brase			Date of Receipt
	Mailing Address 12877 N Cobblestone	10 15 2009		
	City	State	Zip Code	Transaction ID: 20091015164625-881
	Mequon	WI	53097-1812	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer NML	Occupation Rvp Fld S		
	Receipt For:	, ' ' ' 	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	420.00	
с. С.	Full Name (Last, First, Middle Initial) Jennifer L. Brase	1		Date of Receipt
	Mailing Address 12877 N Cobblestone			10
	City	State	Zip Code	Transaction ID: 20091105152628-881
	Mequon FEC ID number of contributing federal political committee.	C	53097-1812	Amount of Each Receipt this Period 20.00
	Name of Employer NML	Occupation Rvp Fld S		
	Receipt For: Primary General Other (specify) ▼	, ' 	e Year-to-Date ▼ 420.00	
	SUBTOTAL of Receipts This Page (optional)			60.00
•	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 64 / 5 / 4 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may g the name and add	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	ırance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Jennifer L. Brase			Date of Receipt
Mailing Address 12877 N Cobblesto	one		1 1 1 5 2 0 0 9
City <u>Mequon</u>	State WI	Zip Code 53097-1812	Transaction ID: 2009111816423-881 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer NML	Occupation Rvp Fld S		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 420.00	
Full Name (Last, First, Middle Initial) Kristofer D. Breitzman			Date of Receipt
Mailing Address W290 N3649 Tall	Tree		0 9 1 5 2 0 0 9
City Pewaukee	State WI	Zip Code 53072	Transaction ID: 20090921-1041-17- Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33072	20.00
Name of Employer NML	Occupation Director	1	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Kristofer D. Breitzman			Date of Receipt
Mailing Address W290 N3649 Tall	Tree		0 9 3 0 2 0 0 9
City Pewaukee	State WI	Zip Code 53072	Transaction ID: 20091008104013-96 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00072	20.00
Name of Employer NML	Occupation Director	1	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (option			60.00

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 574 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura			
/ The Northwestern Mutual Life insura	ance Company	rederal PAC	
Full Name (Last, First, Middle Initial) Kristofer D. Breitzman Mailing Address W290 N3649 Tall Tr	100		Date of Receipt
Walling Address - W230 N3043 Tall TI			10 15 2009
City	State	Zip Code	Transaction ID: 20091015164625-96
Pewaukee	WI	53072	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer NML	Occupation Director	1	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		300.00	
Full Name (Last, First, Middle Initial) Kristofer D. Breitzman			Date of Receipt
Mailing Address W290 N3649 Tall Tr	ree		10 31 2009
City	State	Zip Code	Transaction ID: 20091105152628-9
Pewaukee	WI	53072	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer NML	Occupation Director	1	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		300.00	
Full Name (Last, First, Middle Initial) Kristofer D. Breitzman			Date of Receipt
Mailing Address W290 N3649 Tall Tr	ree		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 2009111816423-966
Pewaukee	WI	53072	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer NML	Occupation Director	1	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		300.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>		60.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 66 / 574 (check only one) X 11a
0	ny information copied from such Reports and r for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	the name and ad	dress of any political committee to	on for the purpose of soliciting contributions
. ∠	Full Name (Last, First, Middle Initial) Anne T. Brower			Date of Receipt
	Mailing Address 2314 E Edgewood A	venue		09 15 2009
	City	State	Zip Code	Transaction ID: 20090921-622-17-1
	Shorewood	WI	53211-2939	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.00
	Name of Employer NML	Occupatio Asst Gc	n & Asst Sec	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 252.00	
_	Full Name (Last, First, Middle Initial) Anne T. Brower			Date of Receipt
	Mailing Address 2314 E Edgewood A			09 / 30 / 4 4 4 4
	City	State	Zip Code	Transaction ID: 20091008104013-548
	Shorewood FEC ID number of contributing federal political committee.	C	53211-2939	Amount of Each Receipt this Period 12.00
	Name of Employer NML	Occupation Asst Gc	an & Asst Sec	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 252.00	
_	Full Name (Last, First, Middle Initial) Anne T. Brower Mailing Address 2314 E Edgewood A	Avenue		Date of Receipt
	City	State	Zip Code	1 0 1 5 2 0 0 9 Transaction ID: 20091015164625-547
	Shorewood	WI	53211-2939	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.00
	Name of Employer NML	Occupation Asst Gc	n & Asst Sec	
	Receipt For: Primary General Other (specify) ▼	- ' '	e Year-to-Date ▼ 252.00	
	SUBTOTAL of Receipts This Page (optional)		36.00

	HEDULE A (FEC Form 3X) EMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67 / 574 (check only one) X 11a
or fo	information copied from such Reports and or commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	he name and ad	dress of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial)	unce Company	/ Federal FAC	
-	Anne T. Brower Mailing Address 2314 E Edgewood A	venue		Date of Receipt 1 0 3 1 2 0 0 9
	City Shorewood	State WI	Zip Code 53211-2939	Transaction ID: 20091105152628-547
F	FEC ID number of contributing ederal political committee.	C	33211-2339	Amount of Each Receipt this Period 12.00
<u>-</u> 1	Name of Employer NML	Occupation Asst Gc	n & Asst Sec	
F	Receipt For: Primary General Other (specify) ▼	 	e Year-to-Date ▼ 252.00	
. <u>/</u>	Full Name (Last, First, Middle Initial) Anne T. Brower Mailing Address 2314 E Edgewood A	venue		Date of Receipt
_	Dity	State	Zip Code	1 1 1 5 2 0 0 9 Transaction ID: 2009111816423-548
	Shorewood	WI	53211-2939	Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	C		12.00
1	Name of Employer NML	Occupation Asst Gc	n & Asst Sec	
F	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 252.00	
	Full Name (Last, First, Middle Initial) Pency P. Byhardt			Date of Receipt
N	Mailing Address W148 N10042 Wind	song		09 15 YYYY 2009
	City Germantown	State WI	Zip Code 53022	Transaction ID: 20090921-1127-17-1 Amount of Each Receipt this Period
F	FEC ID number of contributing ederal political committee.	C	33022	12.00
_ 1	Name of Employer NML	Occupation VP Field		
F	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 252.00	
SU	BTOTAL of Receipts This Page (optional)			36.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insural	ne name and ad	Idress of any political committee to	on for the purpose of soliciting contributions
∠ A.	Full Name (Last, First, Middle Initial) Pency P. Byhardt Mailing Address W148 N10042 Winds	song		Date of Receipt
	City Germantown	State WI	Zip Code 53022	Transaction ID: 20091008104013-1054 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		12.00
	Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation VP Field Aggregate		
- В.	Full Name (Last, First, Middle Initial) Pency P. Byhardt Mailing Address W148 N10042 Winds	song		Date of Receipt
	City	State	Zip Code	Transaction ID: 20091015164625-1052
	Germantown FEC ID number of contributing federal political committee.	C	53022	Amount of Each Receipt this Period 12.00
	Name of Employer NML	Occupation VP Field		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 252.00	
- C.	Full Name (Last, First, Middle Initial) Pency P. Byhardt Mailing Address W148 N10042 Winds	song		Date of Receipt 10 31 2009
	City	State	Zip Code	Transaction ID: 20091105152628-1052
	Germantown FEC ID number of contributing federal political committee.	C	53022	Amount of Each Receipt this Period 12.00
	Name of Employer NML	Occupation VP Field		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 252.00	
	SUBTOTAL of Receipts This Page (optional)			36.00
	TOTAL This Period (last page this line number	er only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 69 / 574 (check only one) X 11a
	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	by not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ce Company	y Federal PAC	
∠ A .	Full Name (Last, First, Middle Initial) Pency P. Byhardt			Date of Receipt
	Mailing Address W148 N10042 Windso	M M / D D / Y Y Y Y Y Y Y Y 1 1 5 2 0 0 9		
	City <u>Germantown</u>	State WI	Zip Code 53022	Transaction ID: 2009111816423-1052 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		12.00
	Name of Employer NML	Occupation VP Field		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 252.00	
- В.	Full Name (Last, First, Middle Initial) Michael T Byrne	1		Date of Receipt
	Mailing Address 395 La Casa Viaduct			07 15 2009
	City Walnut Creek	State CA	Zip Code 94598-4842	Transaction ID: 20090720-1216-13-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1 1	82.00
	Name of Employer NML	Occupation Special A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1937.00	
- С.	Full Name (Last, First, Middle Initial) Michael T Byrne			Date of Receipt
	Mailing Address 395 La Casa Viaduct			07 31 7 2009
	City Walnut Creek	State CA	Zip Code 94598-4842	Transaction ID: 20090804-1213-10-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		82.00
	Name of Employer NML	Occupation Special A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1937.00	
	SUBTOTAL of Receipts This Page (optional)			176.00
ļ	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEO		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 / 574 (check only one) X 11a
or for commercial purposes, o	ther than using the name and a	ay not be sold or used by any pers ddress of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE The Northwestern Mut	ual Life Insurance Compan	ny Federal PAC	
Full Name (Last, First, Michael T Byrne			Date of Receipt
	a Casa Viaduct		08 15 2009
City Walnut Creek	State CA	Zip Code 94598-4842	Transaction ID: 20090819-38-14-0 Amount of Each Receipt this Period
FEC ID number of contrib federal political committee			82.00
Name of Employer NML	Occupati Special		
Receipt For: Primary Other (specify) ▼	Aggrega	te Year-to-Date ▼ 1937.00	
Full Name (Last, First, Mic Michael T Byrne	•		Date of Receipt
Mailing Address 395 La	a Casa Viaduct	08 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State	Zip Code	Transaction ID: 20090902-38-14-46
Walnut Creek FEC ID number of contrib federal political committee		94598-4842	Amount of Each Receipt this Period 82.00
Name of Employer NML	Occupati Special		
Receipt For: Primary Ge Other (specify) ▼	Aggrega	te Year-to-Date ▼ 1937.00	
Full Name (Last, First, Mic Michael T Byrne	Idle Initial)		Date of Receipt
Mailing Address 395 La	a Casa Viaduct		09 15 2009
City Walnut Creek	State CA	Zip Code 94598-4842	Transaction ID: 20090921-39-16-16 Amount of Each Receipt this Period
FEC ID number of contributed rederal political committee	uting	34330 4042	125.00
Name of Employer NML	Occupati Special		
Receipt For: Primary Ge Other (specify) ▼	Aggrega	te Year-to-Date ▼ 1937.00	
SUBTOTAL of Receipts Thi	s Page (optional)		289.00
	ge this line number only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 71 / 574 (check only one) X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	nd Statements may not be sold or used by any personal the name and address of any political committee to rance Company Federal PAC	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Michael T Byrne Mailing Address 395 La Casa Viadu	oct	Date of Receipt
City Walnut Creek FEC ID number of contributing	State Zip Code CA 94598-4842	Transaction ID: 20091008103448-39 Amount of Each Receipt this Period 125.00
Name of Employer NML Receipt For: Primary Other (specify)	Occupation Special Agent Aggregate Year-to-Date ▼ 1937.00	
Full Name (Last, First, Middle Initial) Michael T Byrne Mailing Address 395 La Casa Viadu	loct	Date of Receipt 1 0 1 5 2 0 0 9
City Walnut Creek FEC ID number of contributing	State Zip Code CA 94598-4842	Transaction ID: 2009102293957-39 Amount of Each Receipt this Period
federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	Occupation Special Agent Aggregate Year-to-Date 1937.00	125.00
Full Name (Last, First, Middle Initial) Michael T Byrne Mailing Address 395 La Casa Viadu	oct .	Date of Receipt
City Walnut Creek FEC ID number of contributing	State Zip Code CA 94598-4842	1 0 3 1 2 0 0 9 Transaction ID: 20091105152043-39 Amount of Each Receipt this Period 125.00
federal political committee. Name of Employer NML	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1937.00	
SUBTOTAL of Receipts This Page (options	al)	375.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 / 574 (check only one) X
4	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	Federal PAC	
∠ A.	Full Name (Last, First, Middle Initial) Michael T Byrne			Date of Receipt
	Mailing Address 395 La Casa Viaduct			11 15 2009
	City Walnut Crook	State CA	Zip Code	Transaction ID: 20091118163132-39
	Walnut Creek FEC ID number of contributing federal political committee.	C	94598-4842	Amount of Each Receipt this Period 125.00
	Name of Employer NML	Occupatio Special A		
	Receipt For: Primary General Other (specify) ▼	 	e Year-to-Date ▼ 1937.00	7
_ B.	Full Name (Last, First, Middle Initial) Susan W. Callanan			Date of Receipt
	Mailing Address 2736 N Shepard Avenue			1 1 1 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 2009111816423-1091
	Milwaukee	WI	53211-3852	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.00
	Name of Employer NML	Occupatio Legislativ		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	_
	Other (specify)		204.00	
c.	Full Name (Last, First, Middle Initial) Michael G. Carter			Date of Receipt
	Mailing Address 7322 N Mohawk Road	d		07 15 2009
	City	State	Zip Code	Transaction ID: 20090720-1005-13-0
	Fox Point	WI	53217-3454	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer NML	Occupatio VP & CF	0	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1575.00	
	SUBTOTAL of Receipts This Page (optional) .			212.00
r	TOTAL This Period (last page this line numbe		<u> </u>	

	E A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 73 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information or for commercial	copied from such Reports and Sal purposes, other than using the	Statements mage name and add	y not be sold or used by any pers dress of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
\	OMMITTEE (In Full) vestern Mutual Life Insuran	ce Company	/ Federal PAC	
Full Name (L A. Michael G. Ca	ast, First, Middle Initial) arter			Date of Receipt
Mailing Addr	ess 7322 N Mohawk Road			07 31 2009
City		State	Zip Code	Transaction ID: 20090804-1003-10-0
	ber of contributing cal committee.	C	53217-3454	Amount of Each Receipt this Period 75.00
Name of Em		Occupatio	n	
NML		VP & CF		
Receipt For: Primar Other (Aggregate	e Year-to-Date ▼ 1575.00	
Full Name (L B. Michael G. Ca	ast, First, Middle Initial) arter			Date of Receipt
Mailing Addr	ess 7322 N Mohawk Road			08 15 2009
City		State	Zip Code	Transaction ID: 20090819-1070-14-15
	ber of contributing cal committee.	C	53217-3454	Amount of Each Receipt this Period 75.00
Name of Em	ployer	Occupatio VP & CF		
Receipt For:		Aggregate	e Year-to-Date ▼	
Primar Other (y General (specify) ▼	0 0	1575.00	
Full Name (L Michael G. Ca	ast, First, Middle Initial) arter	1		Date of Receipt
Mailing Addr	ess 7322 N Mohawk Road			08 31 2009
City		State	Zip Code	Transaction ID: 20090902-1070-15-1
Fox Point		WI	53217-3454	Amount of Each Receipt this Period
federal politic	ber of contributing cal committee.	C		75.00
Name of Em NML		Occupatio VP & CF		
Receipt For: Primar Other (Aggregate	e Year-to-Date ▼ 1575.00	
SUBTOTAL of	Receipts This Page (optional)			225.00
	eriod (last page this line number			

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
2	Full Name (Last, First, Middle Initial)	ce Company	y rederal PAC	
Α.	Michael G. Carter Mailing Address 7322 N Mohawk Road			Date of Receipt
	City	State	Zip Code	0 9 1 5 2 0 0 9 Transaction ID: 20090921-1063-17-1
	Fox Point	WI	53217-3454	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer NML	Occupation VP & CF		
	Receipt For: Primary General Other (specify) ▼	+ +	e Year-to-Date ▼ 1575.00	
_ В.	Full Name (Last, First, Middle Initial) Michael G. Carter	l		Date of Receipt
	Mailing Address 7322 N Mohawk Road			09 30 7 9 2009
	City	State	Zip Code	Transaction ID: 20091008104013-989
	Fox Point	WI	53217-3454	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer NML	Occupation VP & CF		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1575.00	
- C.	Full Name (Last, First, Middle Initial) Michael G. Carter	1		Date of Receipt
	Mailing Address 7322 N Mohawk Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20091015164625-988
	Fox Point	WI	53217-3454	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer NML	Occupation VP & CF		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1575.00	
	SUBTOTAL of Receipts This Page (optional)			225.00
Ī	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 75 / 574 (check only one) X
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insuran	ce Company	/ Federal PAC	
∠ A.	Full Name (Last, First, Middle Initial) Michael G. Carter			Date of Receipt
	Mailing Address 7322 N Mohawk Road			10 / 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20091105152628-988
	Fox Point	WI	53217-3454	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer NML	Occupation VP & CF		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1575.00	
- В.	Full Name (Last, First, Middle Initial) Michael G. Carter			Date of Receipt
	Mailing Address 7322 N Mohawk Road	1		11 15 2009
	City	State	Zip Code	Transaction ID: 2009111816423-987
	Fox Point	WI	53217-3454	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer NML	Occupation VP & CF		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1575.00	
- C.	Full Name (Last, First, Middle Initial)			Date of Receipt
.	Gregory V Castronovo Mailing Address 317 Evening Star Land	e		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20090720-1232-13-1
	Bozeman F50 ID analysis of contribution	MT	59715-7738	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer NML	Occupation Special /		
	Receipt For: Primary General Other (specify) ▼	, ' ' ' 	e Year-to-Date ▼ 882.00	
	SUBTOTAL of Receipts This Page (optional)			192.00
F	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 76/574 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may not be sold or used by any pers g the name and address of any political committee t	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu		
Full Name (Last, First, Middle Initial) Gregory V Castronovo		Date of Receipt
Mailing Address 317 Evening Star L	ane	07 31 2009
City Bozeman	State Zip Code MT 59715-7738	Transaction ID: 20090804-1229-10-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer NML	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 882.00	
Full Name (Last, First, Middle Initial) Gregory V Castronovo		Date of Receipt
Mailing Address 317 Evening Star L	ane	08 15 2009
City Bozeman	State Zip Code MT 59715-7738	Transaction ID: 20090819-54-14-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer NML	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 882.00	
Full Name (Last, First, Middle Initial) Gregory V Castronovo		Date of Receipt
Mailing Address 317 Evening Star L	ane	0 8 3 1 2 0 0 9
City Bozeman	State Zip Code MT 59715-7738	Transaction ID: 20090902-54-14-46
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 42.00
Name of Employer NML	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (option:	al)	126.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 77 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any p g the name and address of any political committee	erson for the purpose of soliciting contributions
The Northwestern Mutual Life Insu Full Name (Last, First, Middle Initial)	rance Company Federal PAC	
Gregory V Castronovo		Date of Receipt
Mailing Address 317 Evening Star L		09 15 2009
City Bozeman	State Zip Code MT 59715-7738	Transaction ID: 20090921-55-16-16
FEC ID number of contributing federal political committee.	C 39713-7736	Amount of Each Receipt this Period 42.00
Name of Employer NML	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 882.00	
Full Name (Last, First, Middle Initial) Gregory V Castronovo		Date of Receipt
Mailing Address 317 Evening Star I	_ane	09 30 2009
City	State Zip Code	Transaction ID: 20091008103448-55
Bozeman	MT 59715-7738	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer NML	Occupation Special Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	882.00	
Full Name (Last, First, Middle Initial) Gregory V Castronovo		Date of Receipt
Mailing Address 317 Evening Star I	_ane	10 15 2009
City	State Zip Code	Transaction ID: 2009102293957-55
Bozeman	MT 59715-7738	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer NML	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 882.00	
	al)	126.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 78 / 574 (check only one) X
\	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
/	Full Name (Last, First, Middle Initial)	oce Company	- Tederal I AO	
۹.	Gregory V Castronovo Mailing Address 317 Evening Star Lan	<u></u>		Date of Receipt
	City	State	Zip Code	1 0 3 1 2 0 0 9 Transaction ID: 20091105152043-55
	<u>Bozeman</u>	MT	59715-7738	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer NML	Occupatio Special A		
	Receipt For: Primary General Other (specify) ▼	- ' ' ' 	e Year-to-Date ▼ 882.00	
_ 3.	Full Name (Last, First, Middle Initial) Gregory V Castronovo Mailing Address 317 Evening Star Lan			Date of Receipt
				11 15 2009
	City	State	Zip Code	Transaction ID: 20091118163132-55
	Bozeman	MT	59715-7738	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer NML	Occupatio Special A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 882.00	
- ;.	Full Name (Last, First, Middle Initial) Scott G Christensen			Date of Receipt
	Mailing Address 12 High Meadow Lane	Э		07 15 7 2009
	City	State	Zip Code	Transaction ID: 20090720-1231-13-1
	Amherst FEC ID number of contributing federal political committee.	C	03031-2554	Amount of Each Receipt this Period 125.00
	Name of Employer Christensen Fcl Gp LLC	Occupatio Special A		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 2625.00	
	SUBTOTAL of Receipts This Page (optional) .			209.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 79 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma name and ad	y not be sold or used by any perso dress of any political committee to	
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	ce Company	/ Federal PAC	
Full Name (Last, First, Middle Initial) Scott G Christensen			Date of Receipt
Mailing Address 12 High Meadow Lane	•		07 31 YYYY 2009
City	State	Zip Code	Transaction ID: 20090804-1228-10-0
Amherst	NH	03031-2554	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer Christensen FcI Gp LLC	Occupation Special A		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2625.00	
Full Name (Last, First, Middle Initial) Scott G Christensen			Date of Receipt
Mailing Address 12 High Meadow Lane	<u> </u>		M M / D D / Y Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20090819-53-14-0
Amherst	NH	03031-2554	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer Christensen Fcl Gp LLC	Occupation Special A		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2625.00	
Full Name (Last, First, Middle Initial) Scott G Christensen	1		Date of Receipt
Mailing Address 12 High Meadow Lane	,		08 / 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20090902-53-14-46
Amherst	NH	03031-2554	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer Christensen Fcl Gp LLC	Occupation Special A		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2625.00	
SUBTOTAL of Receipts This Page (optional)			375.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 80 / 574 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	ce Company Federal PAC	
Full Name (Last, First, Middle Initial) Scott G Christensen		Date of Receipt
Mailing Address 12 High Meadow Lane City	State Zip Code	0 9 1 5 2 0 0 9 Transaction ID: 20090921-54-16-16
<u>Amherst</u>	NH 03031-2554	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Christensen Fcl Gp LLC	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2625.00	
Full Name (Last, First, Middle Initial) Scott G Christensen Mailing Address 12 High Meadow Lane		Date of Receipt
		09 30 2009
City	State Zip Code	Transaction ID: 20091008103448-54
Amherst	NH 03031-2554	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Christensen Fcl Gp LLC	Occupation Special Agent	
Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 2625.00	
Full Name (Last, First, Middle Initial) C. Scott G Christensen		Date of Receipt
Mailing Address 12 High Meadow Lane		10 15 2009
City	State Zip Code	Transaction ID: 2009102293957-54
Amherst	NH 03031-2554	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Christensen Fcl Gp LLC	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2625.00	
SUBTOTAL of Receipts This Page (optional)		375.00
TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 81 / 574 (check only one) X
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Inst	and Statements may not be sold or used by any persong the name and address of any political committee to urance Company Federal PAC	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Scott G Christensen Mailing Address 12 High Meadow I City Amherst FEC ID number of contributing federal political committee. Name of Employer Christensen Fcl Gp LLC	State Zip Code NH 03031-2554 C Occupation	Date of Receipt M
Receipt For: Primary General Other (specify)	Special Agent Aggregate Year-to-Date ▼ 2625.00	
Full Name (Last, First, Middle Initial) Scott G Christensen Mailing Address 12 High Meadow	Lane	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20091118163132-54
Amherst	NH 03031-2554	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Christensen Fcl Gp LLC	Occupation Special Agent	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 2625.00	
Full Name (Last, First, Middle Initial) Eric P. Christophersen		Date of Receipt
Mailing Address N55 W21701 Ada	mdale	07 15 2009
City	State Zip Code	Transaction ID: 20090720-725-13-0
Menomonee Fal FEC ID number of contributing federal political committee.	WI 53051	Amount of Each Receipt this Period 53.00
Name of Employer NML	Occupation VP Compliance/Bp	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 837.00	
SURTOTAL of Pagainte This Paga (april)	nal)	303.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 82/5/4 (check only one)
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may g the name and addr	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	ırance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Eric P. Christophersen			Date of Receipt
Mailing Address N55 W21701 Adam	mdale		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Menomonee Fal</u>	State WI	Zip Code 53051	Transaction ID: 20090804-724-10-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		53.00
Name of Employer NML	Occupation VP Comp		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 837.00	
Full Name (Last, First, Middle Initial) Eric P. Christophersen			Date of Receipt
Mailing Address N55 W21701 Adar	mdale		0 8 1 5 2 0 0 9
City Menomonee Fal	State WI	Zip Code 53051	Transaction ID: 20090819-791-14-19 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		53.00
Name of Employer NML	Occupation VP Comp		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Eric P. Christophersen			Date of Receipt
Mailing Address N55 W21701 Adam	mdale		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Menomonee Fal	State WI	Zip Code 53051	Transaction ID: 20090902-791-15-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		53.00
Name of Employer NML	Occupation VP Comp		
Receipt For: Primary General Other (specify) ▼	''	Year-to-Date ▼ 837.00	
SUBTOTAL of Receipts This Page (option	al)		159.00

	SCHEDULE A (FEC Form 3X FEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 83 / 574 (check only one) X
,	Any information copied from such Reports and or for commercial purposes, other than using the such as a su	Statements ma he name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	ance Company	/ Federal PAC	
۷.	Full Name (Last, First, Middle Initial) Eric P. Christophersen			Date of Receipt
	Mailing Address N55 W21701 Adamo	dale		09 / 15 / 2009
	City	State	Zip Code	Transaction ID: 20090921-786-17-1
	Menomonee Fal	WI	53051	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		53.00
	Name of Employer NML	Occupation VP Com	n pliance/Bp	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		837.00	
_	Full Name (Last, First, Middle Initial) Eric P. Christophersen			Date of Receipt
	Mailing Address N55 W21701 Adamo	dale		09 30 7 2009
	City	State	Zip Code	Transaction ID: 20091008104013-713
	Menomonee Fal	WI	53051	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			53.00
	Name of Employer NML	Occupation VP Com	n pliance/Bp	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		837.00	
_	Full Name (Last, First, Middle Initial) Eric P. Christophersen			Date of Receipt
	Mailing Address N55 W21701 Adamo	dale		10 15 2009
	City	State	Zip Code	Transaction ID: 20091015164625-712
	Menomonee Fal	WI	53051	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		53.00
	Name of Employer NML	Occupation VP Com	n pliance/Bp	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		837.00	
Г	SUBTOTAL of Receipts This Page (optional)			159.00

ITEMIZED RECEIPTS	A)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 84/5/4 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may g the name and add	not be sold or used by any personess of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	rance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Eric P. Christophersen			Date of Receipt
Mailing Address N55 W21701 Adar	ndale		10 31 2009
City <u>Menomonee Fal</u>	State WI	Zip Code 53051	Transaction ID: 20091105152628-712 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		53.00
Name of Employer NML	Occupation VP Comp		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 837.00	
Full Name (Last, First, Middle Initial) Eric P. Christophersen			Date of Receipt
Mailing Address N55 W21701 Adar	ndale		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Menomonee Fal	State WI	Zip Code 53051	Transaction ID: 2009111816423-712
FEC ID number of contributing federal political committee.	C	33031	Amount of Each Receipt this Period 53.00
Name of Employer NML	Occupation VP Comp		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼	
Full Name (Last, First, Middle Initial) David D. Clark			Date of Receipt
Mailing Address 1680 Barrington W	/ood		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Brookfield	State WI	Zip Code 53045-2213	Transaction ID: 20090720-698-13-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300+0 22+0	118.00
Name of Employer NML	Occupation Svp Real		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 2994.00	
SUBTOTAL of Receipts This Page (options	-1)		224.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 85 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
0	ny information copied from such Reports and r for commercial purposes, other than using the	Statements may not be sold or used by any per- ne name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insural	nce Company Federal PAC	
∠ 4.	Full Name (Last, First, Middle Initial) David D. Clark		Date of Receipt
	Mailing Address 1680 Barrington Woo		07 31 2009
	City Brookfield	State Zip Code WI 53045-2213	Transaction ID: 20090804-697-10-0
	FEC ID number of contributing federal political committee.	C 35045-2215	Amount of Each Receipt this Period 118.00
	Name of Employer NML	Occupation Svp Real Estate	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2994.00	
	Full Name (Last, First, Middle Initial) David D. Clark		Date of Receipt
	Mailing Address 923 E Kilbourn		08 15 2009
	City	State Zip Code	Transaction ID: 20090819-764-14-15
	Milwaukee FEC ID number of contributing federal political committee.	WI 53202-3493	Amount of Each Receipt this Period 118.00
	Name of Employer NML	Occupation Svp Real Estate	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2994.00	
_	Full Name (Last, First, Middle Initial) David D. Clark		Date of Receipt
	Mailing Address 923 E Kilbourn		0 8 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Milwaukee	State Zip Code WI 53202-3493	Transaction ID: 20090902-764-15-1
	FEC ID number of contributing federal political committee.	C 53202-3493	Amount of Each Receipt this Period 118.00
	Name of Employer NML	Occupation Svp Real Estate	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2994.00	
	SUPTOTAL of Possints This Page (entional)		354.00

Mailing Address 923 E Kilbourn City Milwaukee FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary Other (specify) ▼ City State Zip Code Milwaukee Aggregate Year-to-Date ▼ Primary City State Zip Code WI 53202-3493 Amo Primary Cocupation Svp Real Estate Aggregate Year-to-Date ▼ City State Zip Code WI 53202-3493 Amo FEC ID number of contributing federal political committee. Name of Employer Milwaukee WI 53202-3493 FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Cocupation Svp Real Estate Aggregate Year-to-Date ▼ Primary Occupation Svp Real Estate Aggregate Year-to-Date ▼ Primary Other (specify) ▼ Aggregate Year-to-Date ▼ Primary Amo FEC ID number of contributing federal political committee. Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary Amo FEC ID number of contributing federal political committee. Paggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Primary Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Primary Aggregate Year-to-Date ▼ Aggregate Year-t	NE NUMBER: PAGE 86 / 574 only one) 1a 11b 11c 12 3 14 15 16 17
The Northwestern Mutual Life Insurance Company Federal PAC Full Name (Last, First, Middle Initial) David D. Clark Mailing Address 923 E Kilbourn City Milwaukee FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) David D. Clark Mailing Address 923 E Kilbourn FEG ID number of contributing federal political committee. For in part of the primary General City Milwaukee FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Cupuation Syp Real Estate Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) David D. Clark Mailing Address 923 E Kilbourn City State Zip Code Milwaukee FEC ID number of contributing federal political committee. Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) David D. Clark Mailing Address 923 E Kilbourn City Milwaukee FEC ID number of contributing federal political committee. Name of Employer Milwaukee FEC ID number of contributing federal political committee. Name of Employer Nilk Receipt For: Primary General Aggregate Year-to-Date ▼ Fecel D number of contributing federal political committee. Name of Employer Nilk Receipt For: Primary General Aggregate Year-to-Date ▼ Fecel D number of contributing federal political committee. Name of Employer Nilk Receipt For: Primary General Aggregate Year-to-Date ▼ Fecel D number of contributing federal political committee. Name of Employer Nilk Receipt For: Primary General	surpose of soliciting contributions tributions from such committee.
A. David D. Clark Mailing Address 923 E Kilbourn City Milwaukee FEC ID number of contributing federal political committee. Name of Employer NML Primary General Other (specify) ▼ City Name of Employer NMI State Zip Code WI 53202-3493 Full Name (Last, First, Middle Initial) David D. Clark Mailing Address 923 E Kilbourn City Name of Employer NML State Zip Code WI 53202-3493 FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Primary General Other (specify) ▼ City State Zip Code WI 53202-3493 FEC ID number of contributing federal political committee. Primary General Other (specify) ▼ David D. Clark Mailing Address 923 E Kilbourn City Milwaukee Yu 2994.00 Date Milwaukee Yu 2994.00 Date Milwaukee Yu 53202-3493 FEC ID number of contributing federal political committee. City Milwaukee Yu 53202-3493 City Milwaukee Yu 53202-3493 City Mailing Address 923 E Kilbourn City Milwaukee Yu 53202-3493 City Milwaukee Yu 53202-3493 City Mailing Address 923 E Kilbourn City Milwaukee Yu 53202-3493 Amo Amo Amo Amo Amo Amo Amo Am	
City Milwaukee FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ PIUI Name (Last, First, Middle Initial) David D. Clark Name of Employer NML State Zip Code Milwaukee WI 53202-3493 Amo Date Mailing Address 923 E Kilbourn City Name of Employer NML Name of Employer NML Receipt For: Primary General Other (specify) ▼ Publication Sup Real Estate Receipt For: Primary General Other (specify) ▼ Publication Sup Real Estate Receipt For: Primary General Other (specify) ▼ Publication Sup Real Estate Aggregate Year-to-Date ▼ Date Trans Amo City State Zip Code WI 53202-3493 Date Date Aggregate Year-to-Date ▼ City State Zip Code WI 53202-3493 City State Zip Code Milwaukee WI 53202-3493 City State Zip Code Milwaukee WI 53202-3493 Amo City State Zip Code WI 53202-3493 Amo City State Zip Code WI 53202-3493 Amo City State Zip Code WI 53202-3493 Amo Amo City State Zip Code WI 53202-3493 Amo Amo Amo City State Zip Code WI 53202-3493 Amo Amo Amo Amo Amo City State Zip Code WI 53202-3493 Amo Amo Amo Amo Amo Amo Amo Am	e of Receipt
Milwaukee FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specifty) ▼ Full Name (Last, First, Middle Initial) David D. Clark Mailing Address 923 E Kilbourn City State Zip Code WI 53202-3493 FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specifty) ▼ Cocupation Syp Real Estate Aggregate Year-to-Date ▼ FEC ID number of contributing federal political committee. Paggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) David D. Clark Mailing Address 923 E Kilbourn City State Zip Code Trans Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) David D. Clark Mailing Address 923 E Kilbourn City State Zip Code Milwaukee FEC ID number of contributing federal political committee. City State Zip Code Milwaukee FEC ID number of contributing federal political committee. Name of Employer NML Name of Employer NML Receipt For: Primary General Occupation Syp Real Estate Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	
FEC ID number of contributing federal political committee. Name of Employer NML	saction ID: 20090921-759-17-1 punt of Each Receipt this Period
NML Receipt For: Primary	118.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) David D. Clark Mailing Address 923 E Kilbourn City State Zip Code Milwaukee WI 53202-3493 FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) David D. Clark Mailing Address 923 E Kilbourn City State Zip Code Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) David D. Clark Mailing Address 923 E Kilbourn City State Zip Code Milwaukee WI 53202-3493 Amo FEC ID number of contributing federal political committee. Name of Employer NML State Zip Code Milwaukee FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General	
Date Mailing Address 923 E Kilbourn City State Zip Code WI 53202-3493 Amo FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ City State Zip Code Primary General Other (specify) ▼ Payd 1.0 City State Zip Code Milwaukee Mailing Address 923 E Kilbourn City State Zip Code Milwaukee Milwaukee Milwaukee FEC ID number of contributing federal political committee. Name of Employer NML City State Zip Code Trans Milwaukee Milwaukee FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Occupation Svp Real Estate Receipt For: Primary General	
City State Zip Code Trans Milwaukee WI 53202-3493 Amo FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ CITY Mailing Address 923 E Kilbourn City State Zip Code Trans Milwaukee WI 53202-3493 Date Milwaukee WI 53202-3493 FEC ID number of contributing federal political committee. Name of Employer NML City State Zip Code Trans Milwaukee WI 53202-3493 FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	e of Receipt
Milwaukee WI 53202-3493 Amo FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary Other (specify) ▼ Cull Name (Last, First, Middle Initial) David D. Clark Mailing Address 923 E Kilbourn City Milwaukee WI 53202-3493 Date Trans Milwaukee WI 53202-3493 Amo Culty Milwaukee Culty Name of Employer Nimitee. Name of Employer Nimitee. Name of Employer Nimitee. Name of Employer Nimitee. Receipt For: Primary General Amo Culty Aggregate Year-to-Date ▼ Occupation Svp Real Estate Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	9 30 7 7 7 7 9
FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ C. Pull Name (Last, First, Middle Initial) David D. Clark Mailing Address 923 E Kilbourn City State Zip Code Milwaukee WI 53202-3493 FEC ID number of contributing federal political committee. Name of Employer NML Name of Employer NML Receipt For: Primary General Occupation Svp Real Estate Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	saction ID: 20091008104013-686
Name of Employer NML Svp Real Estate	ount of Each Receipt this Period
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) David D. Clark Mailing Address 923 E Kilbourn City State Zip Code Milwaukee WI 53202-3493 FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Svp Real Estate Aggregate Year-to-Date ▼ Occupation Svp Real Estate Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	118.00
Primary General Other (specify) ▼ Pull Name (Last, First, Middle Initial) David D. Clark Mailing Address 923 E Kilbourn City State Zip Code Milwaukee WI 53202-3493 FEC ID number of contributing federal political committee. Name of Employer NML Name of Employer Svp Real Estate Receipt For: Primary General	
David D. Clark Mailing Address 923 E Kilbourn City State Zip Code Milwaukee WI 53202-3493 FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Date M 1 0 C Trans Amo C Aggregate Year-to-Date ▼	
City State Zip Code Trans Milwaukee WI 53202-3493 FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Aggregate Year-to-Date ▼ Primary General	e of Receipt
Milwaukee WI 53202-3493 Amo FEC ID number of contributing federal political committee. Name of Employer NML Svp Real Estate Receipt For: Primary General Amo Amo Amo Amo Amo Amo Amo Am	
FEC ID number of contributing federal political committee. Name of Employer NML Svp Real Estate Receipt For: Primary General Aggregate Year-to-Date	saction ID: 20091015164625-685
Receipt For: Primary General Aggregate Year-to-Date 7004.00	ount of Each Receipt this Period
Receipt For: Primary General Aggregate Year-to-Date 7004.00	
SUBTOTAL of Receipts This Page (optional)	354.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS Any information copied from such Repo	for each category of the Detailed Summary Page rts and Statements may not be sold or used by any person	FOR LINE NUMBER: PAGE 87 / 574 (check only one) X
or for commercial purposes, other than NAME OF COMMITTEE (In Full)	using the name and address of any political committee to insurance Company Federal PAC	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) David D. Clark		Date of Receipt
Mailing Address 923 E Kilbourn		10 31 2009
City	State Zip Code	Transaction ID: 20091105152628-685
Milwaukee	WI 53202-3493	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	118.00
Name of Employer NML	Occupation Svp Real Estate	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2994.00	
Full Name (Last, First, Middle Initial)	L	Patrick Provide
David D. Clark Mailing Address 923 E Kilbourn		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 2009111816423-685
Milwaukee	WI 53202-3493	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	118.00
Name of Employer NML	Occupation Svp Real Estate	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2994.00	
Full Name (Last, First, Middle Initial) Richard M Condrey		Date of Receipt
Mailing Address 907 Williamson	n Drive	07 15 YYYY 2009
City	State Zip Code	Transaction ID: 20090720-1193-13-1
Raleigh	NC 27608-2307	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	208.00
Name of Employer Carolina Condrey Grp	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4368.00	
SUBTOTAL of Receipts This Page (or	otional)	444.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Fori	for e	separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: PAGE 88/5/4 (check only one)
Any information copied from such Rep or for commercial purposes, other than	orts and Statements may not be using the name and address of	sold or used by any perso any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	Insurance Company Feder	al PAC	
Full Name (Last, First, Middle Initia Richard M Condrey)		Date of Receipt
Mailing Address 907 Williamso	M M / D D / Y Y Y Y Y O O O O		
City <u>Raleigh</u>		Code 608-2307	Transaction ID: 20090804-1191-10-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		208.00
Name of Employer Carolina Condréy Grp	Occupation Special Agent		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to	o-Date ▼ 4368.00	
Full Name (Last, First, Middle Initia)		Date of Receipt
Mailing Address 907 Williamso	0 8 1 5 2 0 0 9		
City Raleigh		Code 608-2307	Transaction ID: 20090819-16-14-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	000 2007	208.00
Name of Employer Carolina Condrey Grp	Occupation Special Agent		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to	o-Date ▼ 4368.00	
Full Name (Last, First, Middle Initia Richard M Condrey			Date of Receipt
Mailing Address 907 Williamso	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Raleigh	•	Code '608-2307	Transaction ID: 20090902-16-14-46
FEC ID number of contributing federal political committee.	C	608-2307	Amount of Each Receipt this Period 208.00
Name of Employer Carolina Condrey Grp	Occupation Special Agent		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to	D-Date ▼ 4368.00	
SUBTOTAL of Receipts This Page (Intional)		624.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 89 / 574 (check only one) X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	nd Statements may not be sold or used by any personate the name and address of any political committee to cance Company Federal PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Richard M Condrey Mailing Address 907 Williamson Dri		Date of Receipt
City Raleigh	State Zip Code NC 27608-2307	Transaction ID: 20090921-16-16-16 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Carolina Condrey Grp Receipt For:	Occupation Special Agent Aggregate Year-to-Date ▼	208.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Richard M Condrey	4368.00	Date of Receipt
Mailing Address 907 Williamson Dri	State Zip Code	M M M / B B D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Raleigh FEC ID number of contributing federal political committee.	NC 27608-2307	Amount of Each Receipt this Period 208.00
Name of Employer Carolina Condrey Grp Receipt For: Primary General Other (specify) ▼	Occupation Special Agent Aggregate Year-to-Date 4368.00	
Full Name (Last, First, Middle Initial) Richard M Condrey Mailing Address 907 Williamson Dri	ve	Date of Receipt 1 0 1 5 2 0 0 9
City Raleigh	State Zip Code NC 27608-2307	Transaction ID: 2009102293957-16 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Carolina Condrey Grp	Occupation Special Agent	208.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4368.00	
SURTOTAL of Receipts This Page (ontions	l)	624.00

SCHEDULE ITEMIZED F	A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 90 / 574 (check only one) X
or for commercial NAME OF COI	pied from such Reports and Sta burposes, other than using the r MMITTEE (In Full) stern Mutual Life Insurance	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Richard M Cond	t, First, Middle Initial) rey s 907 Williamson Drive			Date of Receipt
City <u>Raleigh</u>	r of contributing	State NC	Zip Code 27608-2307	Transaction ID: 20091105152043-16 Amount of Each Receipt this Period
Name of Emplo Carolina Condr Receipt For: Primary Other (sp	over ey Grp General	Occupation Special A Aggregate		208.00
Richard M Cond	t, First, Middle Initial) rey s 907 Williamson Drive			Date of Receipt 1 1 1 1 5 2 0 0 9
City Raleigh FEC ID numbe federal political	r of contributing committee.	State NC	Zip Code 27608-2307	Transaction ID: 20091118163132-16 Amount of Each Receipt this Period 208.00
Name of Emplo Carolina Condr Receipt For: Primary Other (sp	ey Grp General	Occupation Special A Aggregate		
Full Name (Las Barbara E. Cour	t, First, Middle Initial)	0 0		Date of Receipt 1 1 1 5 2 0 0 9
City Whitefish Ba	y r of contributing	State WI	Zip Code 53211-1260	Transaction ID: 2009111816423-713 Amount of Each Receipt this Period
federal political Name of Emplo	committee.	Occupation Dir Mut F	n Fund Acctg	10.00
Receipt For: Primary Other (sp	General ecify) ▼		Year-to-Date ▼ 210.00	
SUBTOTAL of R	Leceipts This Page (optional)			426.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 91 / 574 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	and Statements may not be sold or used by any persong the name and address of any political committee to urance Company Federal PAC	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Charles T. Cruse Mailing Address 2961 Belclaire Driv	NO.	Date of Receipt
City Frisco	State Zip Code TX 75034-5969	0 7 1 5 2 0 0 9 Transaction ID: 20090720-1221-13-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Cruse Fncl Group Inc	Occupation Special Agent	208.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4368.00	
Full Name (Last, First, Middle Initial) Charles T. Cruse Mailing Address 2961 Belclaire Driv	ve	Date of Receipt 0 7
City	State Zip Code	Transaction ID: 20090804-1218-10-0
Frisco FEC ID number of contributing federal political committee.	TX 75034-5969	Amount of Each Receipt this Period 208.00
Name of Employer Cruse Fncl Group Inc	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4368.00	
Full Name (Last, First, Middle Initial) Charles T. Cruse		Date of Receipt
Mailing Address 2961 Belclaire Dri	ve	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Frisco	State Zip Code TX 75034-5969	Transaction ID: 20090819-43-14-0
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 208.00
Name of Employer Cruse Fncl Group Inc	Occupation Special Agent	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4368.00	
SUBTOTAL of Receipts This Page (option	nal)	624.00

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 92 / 574 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar			
Full Name (Last, First, Middle Initial)		- Todorai i i io	
Charles T. Cruse			Date of Receipt
Mailing Address 2961 Belclaire Drive			08 31 2009
City	State	Zip Code	Transaction ID: 20090902-43-14-46
Frisco	TX	75034-5969	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		208.00
Name of Employer Cruse Fncl Group Inc	Occupatio Special A		
Receipt For:	- ' '	e Year-to-Date ▼	
Primary General Other (specify) ▼		4368.00	
Full Name (Last, First, Middle Initial) Charles T. Cruse			Date of Receipt
Mailing Address 2961 Belclaire Drive			09 15 2009
City	State	Zip Code	Transaction ID: 20090921-44-16-16
Frisco	TX	75034-5969	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		208.00
Name of Employer Cruse Fncl Group Inc	Occupation Special A		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4368.00	
Full Name (Last, First, Middle Initial) Charles T. Cruse			Date of Receipt
Mailing Address 2961 Belclaire Drive			0 9 3 0 2 0 0 9
City	State	Zip Code	Transaction ID: 20091008103448-44
Frisco	TX	75034-5969	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		208.00
Name of Employer Cruse Fncl Group Inc	Occupatio Special A		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4368.00	
SUBTOTAL of Receipts This Page (optional) .	1		624.00

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	fo	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 93 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and surfor commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurer			
The Northwestern Mutual Life Insurar	ice Company Fed	derai PAC	
Full Name (Last, First, Middle Initial) Charles T. Cruse			Date of Receipt
Mailing Address 2961 Belclaire Drive			10 15 2009
City	State	Zip Code	Transaction ID: 2009102293957-44
Frisco	TX	75034-5969	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		208.00
Name of Employer Cruse Fncl Group Inc	Occupation Special Agen	nt	
Receipt For:	Aggregate Yea		
Primary General Other (specify) ▼		4368.00	
Full Name (Last, First, Middle Initial) Charles T. Cruse			Date of Receipt
Mailing Address 2961 Belclaire Drive			10 31 2009
City		Zip Code	Transaction ID: 20091105152043-44
Frisco	TX	75034-5969	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		208.00
Name of Employer Cruse Fncl Group Inc	Occupation Special Agen	nt	
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ur-to-Date ▼ 4368.00	
Full Name (Last, First, Middle Initial) Charles T. Cruse			Date of Receipt
Mailing Address 2961 Belclaire Drive			M M / D D / Y Y Y Y Y Y 1 1 1 1 5 2 0 0 9
City		Zip Code	Transaction ID: 20091118163132-44
Frisco	TX	75034-5969	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		208.00
Name of Employer Cruse Fncl Group Inc	Occupation Special Agen	nt	
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	r-to-Date ▼ 4368.00	
SUBTOTAL of Receipts This Page (optional) .			624.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 94 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ 4 .	Full Name (Last, First, Middle Initial) Brian R Cunningham Mailing Address 6251 S Billings Way			Date of Receipt
	City Centennial	State CO	Zip Code 80111-6009	0 7 1 5 2 0 0 9 Transaction ID: 20090720-1215-13-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer Self-Employed	Occupation		50.00
	Receipt For: Primary General Other (specify) ▼		Insurance Agent Year-to-Date ▼ 1050.00	
- 3.	Full Name (Last, First, Middle Initial) Brian R Cunningham Mailing Address 6251 S Billings Way			Date of Receipt 0 7 3 1 2 0 0 9
	City	State	Zip Code	Transaction ID: 20090804-1212-10-0
	Centennial FEC ID number of contributing federal political committee.	CO	80111-6009	Amount of Each Receipt this Period 50.00
	Name of Employer Self-Employed	Occupation	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	. '	e Year-to-Date ▼ 1050.00	
- ;.	Full Name (Last, First, Middle Initial) Brian R Cunningham Mailing Address 6251 S Billings Way			Date of Receipt 0 8 1 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 20090819-37-14-0
	Centennial FEC ID number of contributing federal political committee.	CO	80111-6009	Amount of Each Receipt this Period 50.00
	Name of Employer Self-Employed	Occupation General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1050.00	
ſ	SUBTOTAL of Receipts This Page (optional)			150.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 95 / 574 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	nd Statements may not be sold or used by any person the name and address of any political committee to cance Company Federal PAC	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Brian R Cunningham Mailing Address 6251 S Billings Wa	v	Date of Receipt
City Centennial FEC ID number of contributing	State Zip Code CO 80111-6009	0 8 3 1 2 0 0 9 Transaction ID: 20090902-37-14-46 Amount of Each Receipt this Period
federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼	Occupation General Insurance Agent Aggregate Year-to-Date ▼ 1050.00	50.00
Full Name (Last, First, Middle Initial) Brian R Cunningham Mailing Address 6251 S Billings Wa	у	Date of Receipt 0 9 1 5 2 0 0 9
City Centennial FEC ID number of contributing federal political committee.	State Zip Code CO 80111-6009 C	Transaction ID: 20090921-38-16-16 Amount of Each Receipt this Period 50.00
Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼	Occupation General Insurance Agent Aggregate Year-to-Date 1050.00	
Full Name (Last, First, Middle Initial) Brian R Cunningham Mailing Address 6251 S Billings Wa	y	Date of Receipt 0 9 3 0 2 0 0 9
City Centennial FEC ID number of contributing	State Zip Code CO 80111-6009	Transaction ID: 20091008103448-38 Amount of Each Receipt this Period
federal political committee. Name of Employer Self-Employed	Occupation General Insurance Agent	50.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00	
SUBTOTAL of Receipts This Page (optional	l)	150.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 96 / 574 (check only one) X
	ts and Statements may not be sold or used by any perso sing the name and address of any political committee to	
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life II	nsurance Company Federal PAC	
Full Name (Last, First, Middle Initial) Brian R Cunningham		Date of Receipt
Mailing Address 6251 S Billings	·	10 15 2009
City	State Zip Code	Transaction ID: 2009102293957-38
Centennial	CO 80111-6009	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General Other (specify) ▼	1050.00	
Full Name (Last, First, Middle Initial) Brian R Cunningham		Date of Receipt
Mailing Address 6251 S Billings	Way	10 31 7 9 9
City	State Zip Code	Transaction ID: 20091105152043-38
<u>Centennial</u>	CO 80111-6009	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1050.00	
Full Name (Last, First, Middle Initial) Brian R Cunningham		Date of Receipt
Mailing Address 6251 S Billings	Way	1 1 1 5 2 0 0 9
City	State Zip Code	Transaction ID: 20091118163132-38
<u>Centennial</u>	CO 80111-6009	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1050.00	
	tional)	150.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 97 / 574 (check only one) X	
Any information copied from such Reports or for commercial purposes, other than using	and Statements may not be sold or used by any persong the name and address of any political committee to		
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins			
Full Name (Last, First, Middle Initial) Jefferson V. De Angelis		Date of Receipt	
Mailing Address 4449 Donges Bay	Road	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: 20090720-597-13-0	
Mequon	WI 53092-4883	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	20.00	
Name of Employer NML	Occupation President Msa		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate Year-to-Date ▼ 1503.00		
Full Name (Last, First, Middle Initial) Jefferson V. De Angelis	L	Date of Receipt	
Mailing Address 4449 Donges Bay	Road	07 31 2009	
City	State Zip Code	Transaction ID: 20090804-597-10-0	
Mequon	WI 53092-4883	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	60.00	
Name of Employer NML	Occupation President Msa		
Receipt For:	Aggregate Year-to-Date ▼		
Primary General Other (specify) ▼	1503.00		
Full Name (Last, First, Middle Initial) Jefferson V. De Angelis	L	Date of Receipt	
Mailing Address 4449 Donges Bay	Road	08 15 2009	
City	State Zip Code	Transaction ID: 20090819-665-14-1	
Mequon	WI 53092-4883	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	169.00	
Name of Employer NML	Occupation President Msa		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1503.00		
	nal)	249.00	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 98 / 574 (check only one) X
,	Any information copied from such Reports and or for commercial purposes, other than using t	Statements ma he name and ad	ly not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	nce Company	/ Federal PAC	
∠ A .	Full Name (Last, First, Middle Initial) Jefferson V. De Angelis			Date of Receipt
	Mailing Address 4449 Donges Bay Ro	oad		08 7 31 7 9 9 9
	City Meguon	State WI	Zip Code 53092-4883	Transaction ID: 20090902-665-15-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		169.00
	Name of Employer NML	Occupation Presiden		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1503.00	
– В.	Full Name (Last, First, Middle Initial) Jefferson V. De Angelis Mailing Address 4440 Departs Boy Po	and and		Date of Receipt
	Mailing Address 4449 Donges Bay Road			09 / 15 / 2009
	City Meguon	State WI	Zip Code 53092-4883	Transaction ID: 20090921-662-17-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1	169.00
	Name of Employer NML	Occupation Presiden		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1503.00	
_ С.	Full Name (Last, First, Middle Initial) Jefferson V. De Angelis			Date of Receipt
	Mailing Address 4449 Donges Bay Ro	oad		09 30 7 2009
	City Mequon	State WI	Zip Code 53092-4883	Transaction ID: 20091008104013-588 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1	169.00
	Name of Employer NML	Occupation Presiden		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1503.00	
	SUBTOTAL of Receipts This Page (optional)			507.00
	TOTAL This Period (last page this line numb		<u> </u>	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 99 / 574 (check only one) X
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insural	ne name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Jefferson V. De Angelis		, 1 000/0/17/10	Date of Receipt
Α.	Mailing Address 4449 Donges Bay Ro	ad		1 0 1 5 2 0 0 9
	City <u>Mequon</u>	State WI	Zip Code 53092-4883	Transaction ID: 20091015164625-587 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		169.00
	Name of Employer NML	Occupation Presider		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1503.00	
- В.	Full Name (Last, First, Middle Initial) Jefferson V. De Angelis Mailing Address 4449 Donges Bay Ro	pad		Date of Receipt
	City	State	Zip Code	1 0 3 1 2 0 0 9 Transaction ID: 20091105152628-587
	Mequon	WI	53092-4883	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		169.00
	Name of Employer NML	Occupation Presider		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1503.00	
- C.	Full Name (Last, First, Middle Initial) Jefferson V. De Angelis			Date of Receipt
	Mailing Address 4449 Donges Bay Ro	ad		11 15 2009
	City <u>Meguon</u>	State WI	Zip Code 53092-4883	Transaction ID: 2009111816423-588 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30002 4000	169.00
	Name of Employer NML	Occupation Presider		
	Receipt For: Primary General Other (specify) ▼	_, '	e Year-to-Date ▼ 1503.00	
	SUBTOTAL of Receipts This Page (optional)			507.00
ļ	TOTAL This Period (last page this line number	er only)		

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule for each category of the Detailed Summary Page	ne (check only one)
or for commercial purposes, other than use NAME OF COMMITTEE (In Full)	s and Statements may not be sold or used by ar sing the name and address of any political comm surance Company Federal PAC	ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Lew D Derrickson Mailing Address 5799 Sunset La	ne	Date of Receipt 0 7 15 2009
City Indianapolis	State Zip Code IN 46228-1447	Transaction ID: 20090720-1191-13-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	208.00
Name of Employer Derrickson Fncl Grp Receipt For: Primary General Other (specify) ▼	Special Agent Aggregate Year-to-Date ▼ 4368.	00
Full Name (Last, First, Middle Initial) Lew D Derrickson Mailing Address 5799 Sunset La	ne	Date of Receipt 0 7 3 1 2 0 0 9
City	State Zip Code	Transaction ID: 20090804-1189-10-0
Indianapolis FEC ID number of contributing federal political committee.	IN 46228-1447	Amount of Each Receipt this Period 208.00
Name of Employer Derrickson Fncl Grp	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4368.	00
Full Name (Last, First, Middle Initial) Lew D Derrickson Mailing Address 5799 Sunset La		Date of Receipt
		08 15 2009
City <u>Indianapolis</u>	State Zip Code IN 46228-1447	Transaction ID: 20090819-14-14-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	208.00
Name of Employer Derrickson Fncl Grp	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4368.	00
SUBTOTAL of Receipts This Page (opt	onal)	624.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 101 / 574 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	he name and addre	ss of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Lew D Derrickson Mailing Address 5799 Sunset Lane			Date of Receipt 0 8 3 1 2 0 0 9
City Indianapolis FEC ID number of contributing federal political committee.	State IN	Zip Code 46228-1447	Transaction ID: 20090902-14-14-46 Amount of Each Receipt this Period 208.00
Name of Employer Derrickson Fncl Grp Receipt For: Primary General Other (specify)	Occupation Special Age Aggregate Ye	ent ear-to-Date ▼ 4368.00	
Full Name (Last, First, Middle Initial) Lew D Derrickson Mailing Address 5799 Sunset Lane			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Indianapolis FEC ID number of contributing federal political committee.	State IN	Zip Code 46228-1447	Transaction ID: 20090921-14-16-16 Amount of Each Receipt this Period 208.00
Name of Employer Derrickson Fncl Grp Receipt For: Primary General Other (specify) ▼	Occupation Special Age Aggregate Ye	ent ear-to-Date ▼ 4368.00	
Full Name (Last, First, Middle Initial) Lew D Derrickson Mailing Address 5799 Sunset Lane			Date of Receipt
City Indianapolis FEC ID number of contributing federal political committee.	State IN	Zip Code 46228-1447	Transaction ID: 20091008103448-14 Amount of Each Receipt this Period 208.00
Name of Employer Derrickson Fncl Grp Receipt For: Primary General	Occupation Special Agr Aggregate Yo	ent ear-to-Date ▼ 4368.00	
Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)		0 0 0 0 0 0	624.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 102 / 574 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Lew D Derrickson Mailing Address 5799 Sunset Lane City Indianapolis FEC ID number of contributing federal political committee. Name of Employer Derrickson Fncl Grp Receipt For: Primary General Other (specify)	State IN C Occupation Special A		Date of Receipt 10 15 2009 Transaction ID: 2009102293957-14 Amount of Each Receipt this Period 208.00
Full Name (Last, First, Middle Initial) Lew D Derrickson Mailing Address 5799 Sunset Lane City Indianapolis FEC ID number of contributing federal political committee. Name of Employer Derrickson Fncl Grp Receipt For:	State IN C Occupation Special A	Zip Code 46228-1447	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) Full Name (Last, First, Middle Initial) Lew D Derrickson Mailing Address 5799 Sunset Lane City Indianapolis FEC ID number of contributing federal political committee.	State IN C	Zip Code 46228-1447	Date of Receipt M M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Derrickson Fncl Grp Receipt For: Primary General Other (specify) ▼	Occupation Special A Aggregate		
SUBTOTAL of Receipts This Page (optional)			624.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 103 / 574 (check only one) X	
0	ny information copied from such Reports and r for commercial purposes, other than using the	Statements mage and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	Federal PAC		
۱.	Full Name (Last, First, Middle Initial) Blane Dexheimer			Date of Receipt	
	Mailing Address 350 Sheffield Drive			11 1 1 5 2009	
	City Brookfield	State WI	Zip Code 53005-7926	Transaction ID: 2009111816423-564 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C	00000 7020	10.00	
	Name of Employer NML	Occupatio Director	n		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00		
	Full Name (Last, First, Middle Initial) James S Dobbs	<u> </u>		Date of Receipt	
	Mailing Address RR 1 Box 51B			07 15 YYYY 2009	
	City State		Zip Code	Transaction ID: 20090720-1186-13-1	
	Ripley	WV	25271-9705	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.			25.00	
	Name of Employer Self-Employed	Occupatio General	n Insurance Agent		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	525.00		
_	Full Name (Last, First, Middle Initial) James S Dobbs			Date of Receipt	
	Mailing Address RR 1 Box 51B			07 31 YYYY 2009	
	City	State	Zip Code	Transaction ID: 20090804-1184-10-0	
	Ripley	WV	25271-9705	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		25.00	
	Name of Employer Self-Employed	Occupatio General	n Insurance Agent		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 525.00		
	SUBTOTAL of Receipts This Page (optional) .			60.00	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 104 / 574 (check only one) X
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma ne name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insura	nce Company	y Federal PAC	
Α.	Full Name (Last, First, Middle Initial) James S Dobbs			Date of Receipt
	Mailing Address RR 1 Box 51B			08 15 2009
	City <u>Ripley</u>	State WV	Zip Code 25271-9705	Transaction ID: 20090819-9-14-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer Self-Employed	Occupation General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 525.00	
В.	Full Name (Last, First, Middle Initial) James S Dobbs			Date of Receipt
	Mailing Address RR 1 Box 51B			08 / 08 / 2009
	City Ripley	State WV	Zip Code 25271-9705	Transaction ID: 20090902-9-14-46 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	23211-3103	25.00
	Name of Employer Self-Employed	Occupation General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 525.00	
с. С.	Full Name (Last, First, Middle Initial) James S Dobbs			Date of Receipt
	Mailing Address RR 1 Box 51B			0 9 1 5 2 0 0 9
	City Ripley	State WV	Zip Code 25271-9705	Transaction ID: 20090921-9-16-16
	FEC ID number of contributing federal political committee.	C	23271-9703	Amount of Each Receipt this Period 25.00
	Name of Employer Self-Employed	Occupatio General	on Insurance Agent	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 525.00	
	SUBTOTAL of Receipts This Page (optional)	1		75.00
İ	TOTAL This Period (last page this line number	er only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 105 / 574 (check only one) X
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements mane name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insura	nce Company	/ Federal PAC	
Α.	Full Name (Last, First, Middle Initial) James S Dobbs Mailing Address RR 1 Box 51B			Date of Receipt
	Mailing Address RR 1 Box 51B City	State	Zip Code	0 9 3 0 2 0 0 9 Transaction ID: 20091008103448-9
	Ripley	WV	25271-9705	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer Self-Employed	Occupation General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 525.00	
В.	Full Name (Last, First, Middle Initial) James S Dobbs			Date of Receipt
	Mailing Address RR 1 Box 51B			10 15 2009
	City	State	Zip Code	Transaction ID: 2009102293957-9
	Ripley FEC ID number of contributing federal political committee.	C	25271-9705	Amount of Each Receipt this Period 25.00
	Name of Employer Self-Employed	Occupation General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 525.00	
С.	Full Name (Last, First, Middle Initial) James S Dobbs			Date of Receipt
	Mailing Address RR 1 Box 51B			10 31 YYYY 2009
	City Ripley	State WV	Zip Code	Transaction ID: 20091105152043-9
	FEC ID number of contributing federal political committee.	C	25271-9705	Amount of Each Receipt this Period 25.00
	Name of Employer Self-Employed	Occupatio General	on Insurance Agent	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 525.00	
	SUBTOTAL of Receipts This Page (optional)			75.00
	TOTAL This Period (last page this line number	er only)		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 106 / 574 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	and Statements may not be sold or used by any perso g the name and address of any political committee to urance Company Federal PAC	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) James S Dobbs Mailing Address RR 1 Box 51B		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City Ripley	State Zip Code WV 25271-9705	Transaction ID: 20091118163132-9 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼	Occupation General Insurance Agent Aggregate Year-to-Date 525.00	
Full Name (Last, First, Middle Initial) Mark G. Doll Mailing Address 8420 N Pelican La	ne	Date of Receipt 0 7 1 5 2 0 0 9
City	State Zip Code	Transaction ID: 20090720-874-13-0
River Hills FEC ID number of contributing federal political committee.	WI 53217-2058	Amount of Each Receipt this Period 208.00
Name of Employer NML	Occupation EVP & CIO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4368.00	
Full Name (Last, First, Middle Initial) Mark G. Doll Mailing Address 8420 N Pelican La	ne	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20090804-872-10-0
River Hills FEC ID number of contributing federal political committee.	WI 53217-2058	Amount of Each Receipt this Period 208.00
Name of Employer NML	Occupation EVP & CIO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4368.00	
SUBTOTAL of Receipts This Page (option	al)	441.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 107 / 574 (check only one) X 11a
Ar	y information copied from such Reports and for commercial purposes, other than using th	Statements mage name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	Federal PAC	
۷.	Full Name (Last, First, Middle Initial) Mark G. Doll			Date of Receipt
	Mailing Address 8420 N Pelican Lane			08 15 2009
	City River Hills	State WI	Zip Code 53217-2058	Transaction ID: 20090819-939-14-15 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.00
	Name of Employer NML	Occupatio EVP & C		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4368.00	
 3.	Full Name (Last, First, Middle Initial) Mark G. Doll			Date of Receipt
	Mailing Address 8420 N Pelican Lane			08 31 2009
	City	State	Zip Code	Transaction ID: 20090902-939-15-1
	River Hills FEC ID number of contributing federal political committee.	C	53217-2058	Amount of Each Receipt this Period 208.00
	Name of Employer NML	Occupatio EVP & C		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4368.00	
 :_	Full Name (Last, First, Middle Initial) Mark G. Doll			Date of Receipt
	Mailing Address 8420 N Pelican Lane			09 15 2009
	City River Hills	State WI	Zip Code 53217-2058	Transaction ID: 20090921-934-17-1
	FEC ID number of contributing federal political committee.	C	33217-2030	Amount of Each Receipt this Period 208.00
	Name of Employer NML	Occupatio EVP & C		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4368.00	
		-I		624.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 108 / 574 (check only one) X	
4	Any information copied from such Reports and or for commercial purposes, other than using the	Statements made and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	Federal PAC		
۱.	Full Name (Last, First, Middle Initial) Mark G. Doll			Date of Receipt	
	Mailing Address 8420 N Pelican Lane City	State	Zip Code	0 9 3 0 2 0 0 9 Transaction ID: 20091008104013-861	
	River Hills	WI	53217-2058	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		208.00	
	Name of Employer NML	Occupatio EVP & C			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4368.00		
_ 3.	Full Name (Last, First, Middle Initial) Mark G. Doll			Date of Receipt	
	Mailing Address 8420 N Pelican Lane			10 15 7 9 9 9	
	City St		Zip Code	Transaction ID: 20091015164625-860	
	River Hills FEC ID number of contributing	C	53217-2058	Amount of Each Receipt this Period 208.00	
	federal political committee.				
	Name of Employer NML	Occupatio EVP & C			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		4368.00		
. –	Full Name (Last, First, Middle Initial) Mark G. Doll			Date of Receipt	
	Mailing Address 8420 N Pelican Lane			10 31 2009	
	City	State	Zip Code	Transaction ID: 20091105152628-860	
	River Hills	WI	53217-2058	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		208.00	
	Name of Employer NML	Occupatio EVP & C	10		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4368.00		
	SUBTOTAL of Receipts This Page (optional) .			624.00	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 109 / 5 / 4 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	ance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Mark G. Doll			Date of Receipt
Mailing Address 8420 N Pelican Lan	е		1 1 1 5 2 0 0 9
City River Hills	State WI	Zip Code 53217-2058	Transaction ID: 2009111816423-860 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		208.00
Name of Employer NML	Occupatio EVP & C		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4368.00	
Full Name (Last, First, Middle Initial) Steven Dugal			Date of Receipt
Mailing Address 9 Falcon Drive			0 7 1 5 2 0 0 9
City Mandeville	State LA	Zip Code 70471-2952	Transaction ID: 20090720-1219-13-1
FEC ID number of contributing federal political committee.	C	70471-2932	Amount of Each Receipt this Period 125.00
Name of Employer NML	Occupatio Special A		
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 3040.00	
Full Name (Last, First, Middle Initial) Steven Dugal			Date of Receipt
Mailing Address 9 Falcon Drive			07 31 2009
City Mandeville	State LA	Zip Code 70471-2952	Transaction ID: 20090804-1216-10-0
FEC ID number of contributing federal political committee.	C	70471-2932	Amount of Each Receipt this Period 125.00
Name of Employer NML	Occupatio Special A		
Receipt For: Primary General Other (specify) ▼	 ' ' '	e Year-to-Date ▼ 3040.00	
SUBTOTAL of Receipts This Page (optional	l)		458.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	f	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 110 / 574 (check only one) X
, A	ny information copied from such Reports and r for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	ne name and address	s of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insura	nce Company Fe	deral PAC	
	Full Name (Last, First, Middle Initial) Steven Dugal			Date of Receipt
	Mailing Address 9 Falcon Drive			08 15 2009
	City Mandeville	State LA	Zip Code 70471-2952	Transaction ID: 20090819-41-14-0
	FEC ID number of contributing federal political committee.	C	70471-2332	Amount of Each Receipt this Period 125.00
	Name of Employer NML	Occupation Special Ager	nt	
	Receipt For: Primary General Other (specify)	Aggregate Yea		
	Full Name (Last, First, Middle Initial) Steven Dugal			Date of Receipt
	Mailing Address 9 Falcon Drive			08 31 YYYY 2009
	City	State	Zip Code	Transaction ID: 20090902-41-14-46
	Mandeville	<u>LA</u>	70471-2952	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		125.00
	Name of Employer NML	Occupation Special Ager	nt	
	Receipt For:	Aggregate Yea	ar-to-Date ▼	
	Primary General Other (specify)	0 0 0	3040.00	
_	Full Name (Last, First, Middle Initial) Steven Dugal			Date of Receipt
	Mailing Address 9 Falcon Drive			09 15 2009
	City	State	Zip Code	Transaction ID: 20090921-42-16-16
	Mandeville FEC ID number of contributing	LA	70471-2952	Amount of Each Receipt this Period
	federal political committee.	C		208.00
	Name of Employer NML	Occupation Special Ager	nt	
	Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 3040.00	
	SUBTOTAL of Receipts This Page (optional)			458.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate so for each categor Detailed Summa	ry of the
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and address of any politica	d by any person for the purpose of soliciting contributions I committee to solicit contributions from such committee.
	The Northwestern Mutual Life Insura	nce Company Federal PAC	
۷.	Full Name (Last, First, Middle Initial) Steven Dugal		Date of Receipt
	Mailing Address 9 Falcon Drive		09 30 2009
	City Mandeville	State Zip Code LA 70471-2952	Transaction ID: 20091008103448-42
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 208.00
	Name of Employer NML	Occupation Special Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	3040.00
	Full Name (Last, First, Middle Initial) Steven Dugal		Date of Receipt
	Mailing Address 9 Falcon Drive		10 15 YYYY 2009
	City	State Zip Code	Transaction ID: 2009102293957-42
	Mandeville	LA 70471-2952	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	208.00
	Name of Employer NML	Occupation Special Agent	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼		3040.00
_	Full Name (Last, First, Middle Initial) Steven Dugal		Date of Receipt
	Mailing Address 9 Falcon Drive		10 31 2009
	City	State Zip Code	Transaction ID: 20091105152043-42
	Mandeville FEC ID number of contributing	LA 70471-2952	Amount of Each Receipt this Period
	federal political committee.	C	208.00
	Name of Employer NML	Occupation Special Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	3040.00
			624.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 112 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any in	nformation copied from such Reports and commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	AME OF COMMITTEE (In Full) he Northwestern Mutual Life Insurar	nce Company	Federal PAC	
	ull Name (Last, First, Middle Initial) deven Dugal			Date of Receipt
_	ailing Address 9 Falcon Drive			11 1 15 2009
Ci		State	Zip Code	Transaction ID: 20091118163132-42
	landeville	LA	70471-2952	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		208.00
Na N	ame of Employer ML	Occupatio Special A		
Re	eceipt For:	Aggregate	e Year-to-Date	
	Primary General Other (specify) ▼		3040.00	
	ull Name (Last, First, Middle Initial) ohn E. Dunn			Date of Receipt
M	ailing Address N71W31034 Lower C	lub		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Ci	•	State	Zip Code	Transaction ID: 20090720-652-13-0
<u>H</u>	artland	WI	53029-8716	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		37.00
Na N	ame of Employer ML	Occupatio VP & Ipa		
Re	eceipt For:	- '	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	777.00	
	ull Name (Last, First, Middle Initial)			Date of Receipt
	ailing Address N71W31034 Lower C	lub		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Ci	ity	State	Zip Code	Transaction ID: 20090804-651-10-0
<u>H</u>	artland	WI	53029-8716	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		37.00
Na N	ame of Employer ML	Occupatio VP & Ipa		
Re	eceipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	777.00	
				282.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 113 / 574 (check only one) X
7	Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements ma he name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insura	ance Company	Federal PAC	
٠.	Full Name (Last, First, Middle Initial) John E. Dunn			Date of Receipt
	Mailing Address N71W31034 Lower (08 / 15 / 2009
	City	State WI	Zip Code	Transaction ID: 20090819-718-14-15
	Hartland FEC ID number of contributing	C	53029-8716	Amount of Each Receipt this Period 37.00
	federal political committee.	C		37.00
	Name of Employer NML	Occupatio VP & Ipa		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	777.00	
	Full Name (Last, First, Middle Initial) John E. Dunn			Date of Receipt
	Mailing Address N71W31034 Lower 0	Club		08 31 YYYY 2009
	City	State	Zip Code	Transaction ID: 20090902-718-15-1
	Hartland	WI	53029-8716	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		37.00
	Name of Employer NML	Occupatio VP & Ipa		
	Receipt For:		e Year-to-Date 🔻	
	Primary General Other (specify) ▼		777.00	
_	Full Name (Last, First, Middle Initial) John E. Dunn			Date of Receipt
	Mailing Address N71W31034 Lower (Club		09 15 2009
	City	State	Zip Code	Transaction ID: 20090921-714-17-1
	Hartland	WI	53029-8716	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		37.00
	Name of Employer NML	Occupatio VP & Ipa		
	Receipt For:		e Year-to-Date	
	Primary General Other (specify) ▼		777.00	
Г				111.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	(1)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 114 / 574 (check only one) X 11a
A 0	ny information copied from such Reports an r for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	the name and addre	ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
4 .	Full Name (Last, First, Middle Initial) John E. Dunn Mailing Address N71W31034 Lower	Club		Date of Receipt
	City Hartland	State WI	Zip Code 53029-8716	0 9 3 0 2 0 0 9 Transaction ID: 20091008104013-641 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		37.00
	Name of Employer NML Receipt For:	Occupation VP & Ipas Aggregate Y	Cnsl ∕ear-to-Date ▼	
	Primary General Other (specify) ▼	33 13	777.00	
3.	Full Name (Last, First, Middle Initial) John E. Dunn Mailing Address N71W31034 Lower	Club		Date of Receipt
	City	State	Zip Code	Transaction ID: 20091015164625-640
	Hartland	WI	53029-8716	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		37.00
	Name of Employer NML	Occupation VP & Ipas	Cnsl	
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 777.00	
	Full Name (Last, First, Middle Initial) John E. Dunn Mailing Address N71W31034 Lower	Club		Date of Receipt 10 31 2009
	City	State	Zip Code	Transaction ID: 20091105152628-640
	Hartland FEC ID number of contributing federal political committee.	C	53029-8716	Amount of Each Receipt this Period 37.00
	Name of Employer NML	Occupation VP & Ipas	Cnsl	
	Receipt For: Primary General Other (specify) ▼		/ear-to-Date ▼ 777.00	
	SUBTOTAL of Receipts This Page (optional)		111.00

SCHEDULE A (FEC Form	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 115 / 574 (check only one) X
or for commercial purposes, other than NAME OF COMMITTEE (In Full)	rts and Statements may not be sold or used by any perso using the name and address of any political committee to Insurance Company Federal PAC	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) John E. Dunn		Date of Receipt
Mailing Address N71W31034 L City	State Zip Code	1 1 1 5 2009111816423-640
Hartland FEC ID number of contributing federal political committee.	WI 53029-8716	Amount of Each Receipt this Period 37.00
Name of Employer NML Receipt For:	Occupation VP & Ipas Cnsl Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	777.00	
Full Name (Last, First, Middle Initial) James R Effner, Jr. Mailing Address 2520 Hanford		Date of Receipt 0 7 1 5 2 0 0 9
City Aurora	State Zip Code IL 60502-6969	Transaction ID: 20090720-1223-13-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Effner Fncl Grp Inc	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3150.00	
Full Name (Last, First, Middle Initial) James R Effner, Jr.	I	Date of Receipt
Mailing Address 2520 Hanford		07 31 7 2009
City Aurora	State Zip Code IL 60502-6969	Transaction ID: 20090804-1220-10-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Effner Fncl Grp Inc	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3150.00	
SUBTOTAL of Receipts This Page (o	otional)	337.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Κ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 116 / 5/4 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	rance Company	Federal PAC	
Full Name (Last, First, Middle Initial) James R Effner, Jr.			Date of Receipt
Mailing Address 2520 Hanford Lane			08 15 2009
City Aurora	State IL	Zip Code 60502-6969	Transaction ID: 20090819-45-14-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		150.00
Name of Employer Effner Fncl Grp Inc	Occupatio Special A		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3150.00	
Full Name (Last, First, Middle Initial) James R Effner, Jr.			Date of Receipt
Mailing Address 2520 Hanford Lane	,		0 8 3 1 2 0 0 9
City Aurora	State IL	Zip Code 60502-6969	Transaction ID: 20090902-45-14-46 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		150.00
Name of Employer Effner Fncl Grp Inc	Occupatio Special A		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 3150.00	
Full Name (Last, First, Middle Initial) James R Effner, Jr.			Date of Receipt
Mailing Address 2520 Hanford Lane	}		0 9 1 5 2 0 0 9
City Aurora	State IL	Zip Code 60502-6969	Transaction ID: 20090921-46-16-16
FEC ID number of contributing federal political committee.	C	00002-0909	Amount of Each Receipt this Period 150.00
Name of Employer Effner Fncl Grp Inc	Occupatio Special A		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3150.00	
SUBTOTAL of Receipts This Page (optional	5()		450.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 117 / 574 (check only one) X
7	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial)		, i cuciai i Ac	Date of Receipt
Α.	James R Effner, Jr. Mailing Address 2520 Hanford Lane			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Aurora	State IL	Zip Code 60502-6969	Transaction ID: 20091008103448-46 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer Effner Fncl Grp Inc	Occupation Special A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 3150.00	
- В.	Full Name (Last, First, Middle Initial) James R Effner, Jr. Mailing Address 2520 Hanford Lane	1		Date of Receipt
	City	State	Zip Code	1 0 1 5 2 0 0 9 Transaction ID: 2009102293957-46
	Aurora FEC ID number of contributing	IL .	60502-6969	Amount of Each Receipt this Period
	federal political committee.	C		150.00
	Name of Employer Effner Fncl Grp Inc	Occupation Special A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 3150.00	
- C.	Full Name (Last, First, Middle Initial) James R Effner, Jr.			Date of Receipt
	Mailing Address 2520 Hanford Lane			10 31 2009
	City Aurora	State IL	Zip Code 60502-6969	Transaction ID: 20091105152043-46 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00002-0909	150.00
	Name of Employer Effner Fncl Grp Inc	Occupation Special A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 3150.00	
	SUBTOTAL of Receipts This Page (optional)			450.00
	TOTAL This Period (last page this line number	· only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Κ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 118 / 5 / 4 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	rance Company	Federal PAC	
Full Name (Last, First, Middle Initial) James R Effner, Jr.			Date of Receipt
Mailing Address 2520 Hanford Lane)		1 1 1 5 2 0 0 9
City <u>Aurora</u>	State IL	Zip Code 60502-6969	Transaction ID: 20091118163132-46 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		150.00
Name of Employer Effner Fncl Grp Inc	Occupatio Special A		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3150.00	
Full Name (Last, First, Middle Initial) Eric J. Ekeroth			Date of Receipt
Mailing Address 19672 Stanford Ha	II		M M / D D / Y Y Y Y Y 1 Y 1 1 5 2 0 0 9
City Ashburn	State VA	Zip Code 20147-5223	Transaction ID: 2009111816423-606 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		10.00
Name of Employer NML	Occupatio Director	n Field Prod	
Receipt For: Primary General Other (specify) ▼	 	e Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) Ralph David Ells			Date of Receipt
Mailing Address 9927 N Valley Hill [ס		07 15 2009
City Meguon	State WI	Zip Code 53092	Transaction ID: 20090720-915-13-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30002	38.00
Name of Employer NML	Occupatio Director	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 774.00	
SUBTOTAL of Receipts This Page (optional			198.00

or for c NAN The Full Ralp Mail City Me	ormation copied from such Reports and Sommercial purposes, other than using the ME OF COMMITTEE (In Full) e Northwestern Mutual Life Insurance Name (Last, First, Middle Initial) on David Ells ing Address 9927 N Valley Hill D	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Ralp Mail	e Northwestern Mutual Life Insurand Name (Last, First, Middle Initial) on David Ells	ce Company	Federal PAC	
A. Ralp Mail City Me	oh David Ells			
City <u>Me</u>	ing Address 9927 N Valley Hill D			Date of Receipt
Me				07 31 7 2009
FEC	quon	State WI	Zip Code 53092	Transaction ID: 20090804-913-10-0 Amount of Each Receipt this Period
	CID number of contributing eral political committee.	С		38.00
Nan NM	ne of Employer L	Occupation Director	1	
Rec	eipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 774.00	
Ralp	Name (Last, First, Middle Initial) oh David Ells			Date of Receipt
Mail 	ing Address 9927 N Valley Hill D			08 15 7 2009
City	quon	State WI	Zip Code 53092	Transaction ID: 20090819-980-14-15 Amount of Each Receipt this Period
FEC	C ID number of contributing eral political committee.	C	33032	38.00
Nan NM	ne of Employer L	Occupation Director	1	
Rec	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 774.00	
	Name (Last, First, Middle Initial)	<u> </u>		Date of Receipt
Mail	ing Address 9927 N Valley Hill D			08 31 2009
City Me	guon	State WI	Zip Code 53092	Transaction ID: 20090902-980-15-1 Amount of Each Receipt this Period
FEC	CID number of contributing paral political committee.	С		38.00
Nan NM	ne of Employer L	Occupation Director	1	
Rec	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 774.00	
SUBT	OTAL of Receipts This Page (optional)			114.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 120 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Report or for commercial purposes, other than us NAME OF COMMITTEE (In Full)	s and Statements may not be sold or used by any persol sing the name and address of any political committee to	n for the purpose of soliciting contributions
The Northwestern Mutual Life In	surance Company Federal PAC	
Full Name (Last, First, Middle Initial) Ralph David Ells		Date of Receipt
Mailing Address 9927 N Valley H		09 / 15 / Y Y Y Y Y Y
City <u>Mequon</u>	State Zip Code WI 53092	Transaction ID: 20090921-974-17-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.00
Name of Employer NML	Occupation Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 774.00	
Full Name (Last, First, Middle Initial) Ralph David Ells		Date of Receipt
Mailing Address 9927 N Valley H	lill D	09 30 2009
City	State Zip Code	Transaction ID: 20091008104013-90
Mequon	WI 53092	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.00
Name of Employer NML	Occupation Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 774.00	
Full Name (Last, First, Middle Initial) Ralph David Ells	I	Date of Receipt
Mailing Address 9927 N Valley H	ill D	10 15 2009
City	State Zip Code WI 53092	Transaction ID: 20091015164625-90
Mequon FEC ID number of contributing federal political committee.	WI 53092	Amount of Each Receipt this Period 38.00
Name of Employer NML	Occupation Director	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 774.00	
OUDTOTAL of Provide This Provides	ional)	114.00

ITEMIZED RECEIPTS	Use separate sci for each category Detailed Summa	of the Check drilly drie)
Any information copied from such Reports or for commercial purposes, other than us	and Statements may not be sold or used ing the name and address of any political	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	surance Company Federal PAC	
Full Name (Last, First, Middle Initial) Ralph David Ells		Date of Receipt
Mailing Address 9927 N Valley Hi	II D	10 31 2009
City <u>Mequon</u>	State Zip Code WI 53092	Transaction ID: 20091105152628-900 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.00
Name of Employer NML	Occupation Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	774.00
Full Name (Last, First, Middle Initial) Ralph David Ells		Date of Receipt
Mailing Address 9927 N Valley Hi	II D	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Meguon	State Zip Code WI 53092	Transaction ID: 2009111816423-900 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 33032	38.00
Name of Employer NML	Occupation Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	774.00
Full Name (Last, First, Middle Initial) Keith A Erhard		Date of Receipt
Mailing Address 4807 Timberwoo	d Court	0 7 1 5 2 0 0 9
City West Des Moines	State Zip Code IA 50265-5447	Transaction ID: 20090720-1208-13-1
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 42.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	882.00
SURTOTAL of Receipts This Page (onti-	onal)	118.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 122 / 574 (check only one) X
4	Any information copied from such Reports and or for commercial purposes, other than using t	Statements may he name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	ince Company	Federal PAC	
۱.	Full Name (Last, First, Middle Initial) Keith A Erhard			Date of Receipt
	Mailing Address 4807 Timberwood C	ourt		07 31 2009
	City	State	Zip Code	Transaction ID: 20090804-1206-10-0
	West Des Moines	IA	50265-5447	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		882.00	
. –	Full Name (Last, First, Middle Initial) Keith A Erhard			Date of Receipt
	Mailing Address 4807 Timberwood C	08 15 2009		
	City	State	Zip Code	Transaction ID: 20090819-31-14-0
	West Des Moines	<u>IA</u>	50265-5447	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			42.00
	Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		882.00	
	Full Name (Last, First, Middle Initial) Keith A Erhard			Date of Receipt
	Mailing Address 4807 Timberwood C	ourt		08 7 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	City	State	Zip Code	Transaction ID: 20090902-31-14-46
	West Des Moines	IA	50265-5447	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Self-Employed		Insurance Agent	
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼		882.00	
Γ	SUBTOTAL of Receipts This Page (optional)			126.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 123 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	ne name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
/	,	псе Сопрапу	rederal PAC	
۹.	Full Name (Last, First, Middle Initial) Keith A Erhard			Date of Receipt
	Mailing Address 4807 Timberwood Co	ourt		09 / 15 / 2009
	City	State	Zip Code	Transaction ID: 20090921-31-16-16
	West Des Moines	IA	50265-5447	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Self-Employed	Occupation General I	nsurance Agent	
	Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼	33 13	882.00	
_ s.	Full Name (Last, First, Middle Initial) Keith A Erhard			Date of Receipt
	Mailing Address 4807 Timberwood Co	09 30 Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 20091008103448-31
	West Des Moines	IA	50265-5447	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Self-Employed	Occupation General I	nsurance Agent	
	Receipt For:	_, .	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	882.00	
_	Full Name (Last, First, Middle Initial) Keith A Erhard			Date of Receipt
•	Mailing Address 4807 Timberwood Co	ourt		10 15 2009
	City	State	Zip Code	Transaction ID: 2009102293957-31
	West Des Moines	<u>IA</u>	50265-5447	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Self-Employed	Occupation General I	n nsurance Agent	
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 882.00	
	SUBTOTAL of Receipts This Page (optional)			126.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 124 / 574 (check only one) X
7	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insural	ne name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
2	Full Name (Last, First, Middle Initial)	nice Company	y rederal FAC	
Α.	Keith A Erhard Mailing Address 4807 Timberwood Co	ourt		Date of Receipt 1 0 3 1 2 0 0 9
	City West Des Moines	State IA	Zip Code 50265-5447	Transaction ID: 20091105152043-31 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30203-3447	42.00
	Name of Employer Self-Employed	Occupation General	on Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 882.00	
- В.	Full Name (Last, First, Middle Initial) Keith A Erhard Mailing Address 4807 Timberwood Co	ourt		Date of Receipt
		11 15 2009		
	City West Des Moines	State IA	Zip Code 50265-5447	Transaction ID: 20091118163132-31 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Self-Employed	Occupation General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 882.00	
- C.	Full Name (Last, First, Middle Initial) John C Ertz			Date of Receipt
	Mailing Address 18235 Shaker Boulev	ard ard		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Shaker Heights	State OH	Zip Code 44120-1754	Transaction ID: 20090720-1207-13-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		70.00
	Name of Employer JCE Financial Group	Occupation Special A		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1470.00	
	SUBTOTAL of Receipts This Page (optional)	1		154.00
	TOTAL This Period (last page this line number	er only)		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 125 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16			
NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to				
The Northwestern Mutual Life Insu	urance Company Federal PAC				
Full Name (Last, First, Middle Initial) John C Ertz		Date of Receipt			
Mailing Address 18235 Shaker Bou	ılevard	07 31 7 2009			
City <u>Shaker Heights</u>	State Zip Code OH 44120-1754	Transaction ID: 20090804-1205-10-0 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	70.00			
Name of Employer JCE Financial Group	Occupation Special Agent				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1470.00				
Full Name (Last, First, Middle Initial) John C Ertz		Date of Receipt			
Mailing Address 18235 Shaker Bou	ing Address 18235 Shaker Boulevard				
City	State Zip Code	Transaction ID: 20090819-30-14-0			
Shaker Heights FEC ID number of contributing	OH 44120-1754	Amount of Each Receipt this Period			
federal political committee.	C	70.00			
Name of Employer JCE Financial Group	Occupation Special Agent				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General Other (specify) ▼	1470.00				
Full Name (Last, First, Middle Initial) John C Ertz	I	Date of Receipt			
Mailing Address 18235 Shaker Bou	ılevard	08 31 2009			
City Shaker Heights	State Zip Code OH 44120-1754	Transaction ID: 20090902-30-14-46			
FEC ID number of contributing federal political committee.	C 44120-1734	Amount of Each Receipt this Period 70.00			
Name of Employer JCE Financial Group	Occupation Special Agent				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1470.00				
	nal)	210.00			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 126 / 574 (check only one) X
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) John C Ertz Mailing Address 18235 Shaker Boulev City Shaker Heights FEC ID number of contributing federal political committee. Name of Employer JCE Financial Group Receipt For: Primary General Other (specify)	· · ·	Date of Receipt M M D D 2 0 0 9
Full Name (Last, First, Middle Initial) John C Ertz Mailing Address 18235 Shaker Boulev City Shaker Heights FEC ID number of contributing federal political committee. Name of Employer JCE Financial Group Receipt For: Primary General Other (specify)	State Zip Code OH 44120-1754 C Occupation Special Agent Aggregate Year-to-Date 1470.00	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) John C Ertz Mailing Address 18235 Shaker Boulev City Shaker Heights FEC ID number of contributing federal political committee. Name of Employer JCE Financial Group Receipt For: Primary General Other (specify)	State Zip Code OH 44120-1754 C Occupation Special Agent Aggregate Year-to-Date 1470.00	Date of Receipt M M M / D D / Y Y Y Y Y 1 0 1 5 2009 Transaction ID: 2009102293957-30 Amount of Each Receipt this Period 70.00
SUBTOTAL of Receipts This Page (optional) .		210.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	(X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 127/5/4 (check only one)
Any information copied from such Reports or for commercial purposes, other than usin	and Statements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Inst	urance Company	Federal PAC	
Full Name (Last, First, Middle Initial) John C Ertz			Date of Receipt
Mailing Address 18235 Shaker Box	ulevard		10 31 2009
City Shaker Heights	State OH	Zip Code 44120-1754	Transaction ID: 20091105152043-30 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		70.00
Name of Employer JCE Financial Group	Occupation Special A		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1470.00	
Full Name (Last, First, Middle Initial) John C Ertz			Date of Receipt
Mailing Address 18235 Shaker Box	ulevard		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Shaker Heights	State OH	Zip Code 44120-1754	Transaction ID: 20091118163132-30 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		70.00
Name of Employer JCE Financial Group	Occupation Special A		7
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1470.00	
Full Name (Last, First, Middle Initial) Christina H. Fiasca			Date of Receipt
Mailing Address 9230 N Fairway D	rive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Bayside	State WI	Zip Code 53217-1317	Transaction ID: 20090720-944-13-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30217 1017	85.00
Name of Employer NML	Occupation Svp Ager		
Receipt For: Primary General Other (specify) ▼	- 	Year-to-Date ▼ 1965.00	
SUBTOTAL of Receipts This Page (option	nal)	\	225.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 128 / 574 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Christina H. Fiasca Mailing Address 9230 N Fairway Drive City Bayside FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53217-1317 C Occupation Svp Agency Svcs Aggregate Year-to-Date 1965.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Christina H. Fiasca Mailing Address 9230 N Fairway Drive City Bayside FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53217-1317 C Occupation Svp Agency Svcs Aggregate Year-to-Date 1965.00	Date of Receipt M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Christina H. Fiasca Mailing Address 9230 N Fairway Drive City Bayside FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53217-1317 C Occupation Svp Agency Svcs Aggregate Year-to-Date 1965.00	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional) .		255.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 129 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 11
C	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insuran	ce Company	Federal PAC	
۸.	Full Name (Last, First, Middle Initial) Christina H. Fiasca			Date of Receipt
	Mailing Address 9230 N Fairway Drive			09 15 2009
	City	State	Zip Code	Transaction ID: 20090921-1002-17-1
	Bayside	WI	53217-1317	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer NML	Occupation Svp Ager		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1965.00	
_ 3.	Full Name (Last, First, Middle Initial) Christina H. Fiasca			Date of Receipt
	Mailing Address 9230 N Fairway Drive			09 30 Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20091008104013-929
	Bayside	WI	53217-1317	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer NML	Occupation Svp Ager		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1965.00	
_	Full Name (Last, First, Middle Initial) Christina H. Fiasca			Date of Receipt
	Mailing Address 9230 N Fairway Drive			10 15 2009
	City	State	Zip Code	Transaction ID: 20091015164625-928
	Bayside	WI	53217-1317	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer NML	Occupation Svp Ager		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1965.00	
	SUBTOTAL of Receipts This Page (optional)	•		255.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 130 / 574 (check only one) X
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ce Company	/ Federal PAC	
∠ A .	Full Name (Last, First, Middle Initial) Christina H. Fiasca			Date of Receipt
	Mailing Address 9230 N Fairway Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Bayside	State WI	Zip Code 53217-1317	Transaction ID: 20091105152628-928 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		85.00
	Name of Employer NML	Occupation Svp Age	ncy Svcs	
	Receipt For: Primary General Other (specify) ▼	 	e Year-to-Date ▼ 1965.00	
Б.	Full Name (Last, First, Middle Initial) Christina H. Fiasca			Date of Receipt
	Mailing Address 9230 N Fairway Drive		7: 0 !	11 1 15 2009
	City <u>Bayside</u>	State WI	Zip Code 53217-1317	Transaction ID: 2009111816423-928 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer NML	Occupation Svp Age	ncy Svcs	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1965.00	
с.	Full Name (Last, First, Middle Initial) Daniel M. Flesch	<u> </u>		Date of Receipt
	Mailing Address 369 Sunshine Drive			09 30 7 2009
	City <u>Ha</u> rtland	State WI	Zip Code 53029-8559	Transaction ID: 20091008104013-933 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer NML	Occupation Director	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 255.00	
	SUBTOTAL of Receipts This Page (optional)	1		185.00
f	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 131 / 574 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and add	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Daniel M. Flesch Mailing Address 369 Sunshine Drive			Date of Receipt 1 0 1 5 2 0 0 9
City Hartland FEC ID number of contributing federal political committee.	State WI	Zip Code 53029-8559	Transaction ID: 20091015164625-932 Amount of Each Receipt this Period 15.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation Director Aggregate	n e Year-to-Date ▼ 255.00	
Full Name (Last, First, Middle Initial) Daniel M. Flesch Mailing Address 369 Sunshine Drive			Date of Receipt 1 0 3 1 2 0 0 9
City Hartland FEC ID number of contributing federal political committee.	State WI	Zip Code 53029-8559	Transaction ID: 20091105152628-932 Amount of Each Receipt this Period 15.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation Director Aggregate	n Year-to-Date ▼	1
Full Name (Last, First, Middle Initial) Daniel M. Flesch Mailing Address 369 Sunshine Drive			Date of Receipt
City Hartland FEC ID number of contributing federal political committee.	State WI	Zip Code 53029-8559	Transaction ID: 2009111816423-932 Amount of Each Receipt this Period 15.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation Director Aggregate	e Year-to-Date ▼ 255.00	
SUBTOTAL of Receipts This Page (optional))	45.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 132 / 574 (check only one) X 11a
,	Any information copied from such Reports and or for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any pers dress of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	Federal PAC	
∠ A.	Full Name (Last, First, Middle Initial) John E Fobes, II			Date of Receipt
	Mailing Address 1638 Del Dayo Drive			07 15 2009
	City <u>Carmichael</u>	State CA	Zip Code 95608-6052	Transaction ID: 20090720-1213-13-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.00
	Name of Employer Self-Employed	Occupation General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4368.00	
В.	Full Name (Last, First, Middle Initial) John E Fobes, II			Date of Receipt
	Mailing Address 1638 Del Dayo Drive		07 31 2009	
	City Carmichael	State CA	Zip Code 95608-6052	Transaction ID: 20090804-1210-10-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	35000-0032	208.00
	Name of Employer Self-Employed	Occupation General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4368.00	
-).	Full Name (Last, First, Middle Initial) John E Fobes, II			Date of Receipt
	Mailing Address 1638 Del Dayo Drive			08 15 2009
	City	State	Zip Code	Transaction ID: 20090819-35-14-0
	Carmichael FEC ID number of contributing federal political committee.	CA	95608-6052	Amount of Each Receipt this Period 208.00
	Name of Employer Self-Employed	Occupation General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 4368.00	
Γ		I		624.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 133 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	e name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) John E Fobes, II Mailing Address 1638 Del Dayo Drive City Carmichael FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary Other (specify)	State Zip Code CA 95608-6052 C Occupation General Insurance Agent Aggregate Year-to-Date ▼ 4368.00	Date of Receipt M M M J D D J D J P P P P P P P P P P P P P P
Full Name (Last, First, Middle Initial) John E Fobes, II Mailing Address 1638 Del Dayo Drive City Carmichael FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify)	State Zip Code CA 95608-6052 C Occupation General Insurance Agent Aggregate Year-to-Date ▼ 4368.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) John E Fobes, II Mailing Address 1638 Del Dayo Drive City Carmichael FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify)	State Zip Code CA 95608-6052 C Occupation General Insurance Agent Aggregate Year-to-Date 4368.00	Date of Receipt M M A 2009 Transaction ID: 20091008103448-35 Amount of Each Receipt this Period 208.00
SUBTOTAL of Receipts This Page (optional) .		624.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 134 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
,	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any pers dress of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ce Company	/ Federal PAC	
Α.	Full Name (Last, First, Middle Initial) John E Fobes, II			Date of Receipt
	Mailing Address 1638 Del Dayo Drive			10 / 15 / 2009
	City Carmichael	State CA	Zip Code 95608-6052	Transaction ID: 2009102293957-35 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.00
	Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4368.00	
– В.	Full Name (Last, First, Middle Initial) John E Fobes, II			Date of Receipt
	Mailing Address 1638 Del Dayo Drive			10 31 7 2009
	City Carmichael	State CA	Zip Code 95608-6052	Transaction ID: 20091105152043-35
	FEC ID number of contributing federal political committee.	C	93008-0032	Amount of Each Receipt this Period 208.00
	Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4368.00	
_ C.	Full Name (Last, First, Middle Initial) John E Fobes, II			Date of Receipt
	Mailing Address 1638 Del Dayo Drive			1 1 1 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 20091118163132-35
	Carmichael FEC ID number of contributing federal political committee.	CA	95608-6052	Amount of Each Receipt this Period 208.00
	Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4368.00	
	SUBTOTAL of Receipts This Page (optional)			624.00
t	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate sched for each category of Detailed Summary F	the (crieck orling	
Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by name and address of any political cor	any person for the purpo nmittee to solicit contribu	ose of soliciting contributions utions from such committee.
The Northwestern Mutual Life Insurance	e Company Federal PAC		
Full Name (Last, First, Middle Initial) Donald Forecki		Date of F	·
Mailing Address 208 Laurel Lane		0 7	31 2009
City <u>South Milwauk</u>	State Zip Code WI 53172-1071		tion ID: 20090804-804-10-0 of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	7 Wilcom	15.00
Name of Employer NML	Occupation Dir Inv Ops		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	5.00	
Full Name (Last, First, Middle Initial) Donald Forecki		Date of F	Receipt
Mailing Address 208 Laurel Lane		0 8	15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaci	tion ID: 20090819-871-14-15
South Milwauk	WI 53172-1071	Amount	of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer NML	Occupation Dir Inv Ops		
Receipt For:	Aggregate Year-to-Date ▼		
Primary General Other (specify) ▼	31	5.00	
Full Name (Last, First, Middle Initial) Donald Forecki		Date of F	Receipt
Mailing Address 208 Laurel Lane		0 8	31 2009
City	State Zip Code		tion ID: 20090902-871-15-1
South Milwauk FEC ID number of contributing	WI 53172-1071	Amount	of Each Receipt this Period
federal political committee.	C		15.00
Name of Employer NML	Occupation Dir Inv Ops		
Receipt For: Primary General	Aggregate Year-to-Date ▼		
Other (specify) ▼	319	5.00	
SUBTOTAL of Receipts This Page (optional)			45.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number of			

П	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 136 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A oi	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insuran	ce Company	Federal PAC	
Д .	Full Name (Last, First, Middle Initial) Donald Forecki			Date of Receipt
	Mailing Address 208 Laurel Lane			09 15 2009
	City	State	Zip Code	Transaction ID: 20090921-866-17-1
	South Milwauk	WI	53172-1071	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer NML	Occupatio Dir Inv O		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 315.00	1
		0 0	0 0 0 0 0 0 0	1
В.	Full Name (Last, First, Middle Initial) Donald Forecki			Date of Receipt
	Mailing Address 208 Laurel Lane			09 30 2009
	City	State	Zip Code	Transaction ID: 20091008104013-793
	South Milwauk	WI	53172-1071	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer NML	Occupatio Dir Inv O		
	Receipt For:	- '	e Year-to-Date	
	Primary General Other (specify) ▼	93 - 3 - 1	315.00	
— С.	Full Name (Last, First, Middle Initial)			Date of Receipt
C.	Donald Forecki Mailing Address 208 Laurel Lane			M M / D D / Y Y Y Y Y 1 1 0 1 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 20091015164625-792
	South Milwauk	WI	53172-1071	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer NML	Occupatio Dir Inv O		
	Receipt For:	Aggregate	e Year-to-Date	
	Primary General Other (specify)		315.00	
ſ,	SUBTOTAL of Receipts This Page (optional)	1		45.00
	TOTAL This Period (last page this line number			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 137 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insurar	ice Company	/ Federal PAC	
A.	Full Name (Last, First, Middle Initial) Donald Forecki			Date of Receipt
	Mailing Address 208 Laurel Lane			10 31 2009
	City South Milwauk	State WI	Zip Code 53172-1071	Transaction ID: 20091105152628-792
	FEC ID number of contributing federal political committee.	C	55172-1071	Amount of Each Receipt this Period 15.00
	Name of Employer NML	Occupation Dir Inv C		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 315.00	
- В.	Full Name (Last, First, Middle Initial) Donald Forecki			Date of Receipt
	Mailing Address 208 Laurel Lane			11 15 2009
	City South Milwauk	State WI	Zip Code	Transaction ID: 2009111816423-792
	FEC ID number of contributing federal political committee.	C	53172-1071	Amount of Each Receipt this Period 15.00
	Name of Employer NML	Occupation Dir Inv C		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 315.00	
- C.	Full Name (Last, First, Middle Initial) Lee M Fortenberry			Date of Receipt
	Mailing Address 115 Hillside Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20090720-1233-13-1
	Mechanicsburg FEC ID number of contributing federal political committee.	C	17050-1728	Amount of Each Receipt this Period 42.00
	Name of Employer NM Harrisburg Inc	Occupation Special A		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 882.00	
	SUBTOTAL of Receipts This Page (optional) .	1		72.00
	TOTAL This Period (last page this line numbe			

SCHEDULE ITEMIZED I	E A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 138 / 574 (check only one) X
or for commercial	opied from such Reports and S purposes, other than using the DMMITTEE (In Full) estern Mutual Life Insurand	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (La Lee M Fortenbe	st, First, Middle Initial) erry	. ,		Date of Receipt
Mailing Addre		State PA	Zip Code 17050-1728	7
FEC ID numb federal politica	er of contributing Il committee.	C		42.00
Name of Emp NM Harrisburn Receipt For: Primary Other (s	General pecify) ▼	Occupation Special Aggregate		
Lee M Fortenbe	st, First, Middle Initial) erry ss 115 Hillside Road			Date of Receipt 0 8 1 5 2 0 0 9
City		State	Zip Code	Transaction ID: 20090819-55-14-0
Mechanicsb FEC ID numb federal politica	er of contributing	C	17050-1728	Amount of Each Receipt this Period 42.00
Name of Emp NM Harrisbur	loyer g Inc	Occupatio Special A		
Receipt For: Primary Other (s	General pecify) ▼		Year-to-Date ▼ 882.00	
Full Name (La	st, First, Middle Initial)			Date of Receipt
Mailing Addre				0 8 3 1 2 0 0 9
City		State	Zip Code	Transaction ID: 20090902-55-14-46
Mechanicsb FEC ID numb federal politica	er of contributing	C	17050-1728	Amount of Each Receipt this Period 42.00
Name of Emp NM Harrisbur	oyer g Inc	Occupatio Special A		
Receipt For: Primary Other (s	General pecify) ▼		Year-to-Date ▼ 882.00	
SUBTOTAL of F	Receipts This Page (optional)			126.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 139 / 574 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	Statements may not be sold or used by any person ename and address of any political committee to note Company Federal PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Lee M Fortenberry Mailing Address 115 Hillside Road City Mechanicsburg FEC ID number of contributing federal political committee. Name of Employer NM Harrisburg Inc Receipt For: Primary General Other (specify)	State Zip Code PA 17050-1728 C Occupation Special Agent Aggregate Year-to-Date 882.00	Date of Receipt M M M / D D / Y Y Y Y Y O 9 1 5 2 0 0 9 Transaction ID: 20090921-56-16-16 Amount of Each Receipt this Period 42.00
Full Name (Last, First, Middle Initial) Lee M Fortenberry Mailing Address 115 Hillside Road City Mechanicsburg FEC ID number of contributing federal political committee. Name of Employer NM Harrisburg Inc Receipt For: Primary General Other (specify)	State Zip Code PA 17050-1728 C Occupation Special Agent Aggregate Year-to-Date 882.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Lee M Fortenberry Mailing Address 115 Hillside Road City Mechanicsburg FEC ID number of contributing federal political committee. Name of Employer NM Harrisburg Inc Receipt For: Primary General Other (specify)	State Zip Code PA 17050-1728 C Occupation Special Agent Aggregate Year-to-Date 882.00	Date of Receipt M M M / D D 2 0 0 9 Transaction ID: 2009102293957-56 Amount of Each Receipt this Period 42.00
SUBTOTAL of Receipts This Page (optional) .		126.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 140 / 5 / 4 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	rance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Lee M Fortenberry			Date of Receipt
Mailing Address 115 Hillside Road			M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City Mechanicsburg	State PA	Zip Code 17050-1728	Transaction ID: 20091105152043-56 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer NM Harrisburg Inc	Occupatio Special A		
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 882.00	
Full Name (Last, First, Middle Initial) Lee M Fortenberry			Date of Receipt
Mailing Address 115 Hillside Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Mechanicsburg	State PA	Zip Code	Transaction ID: 20091118163132-5
FEC ID number of contributing federal political committee.	C	17050-1728	Amount of Each Receipt this Period 42.00
Name of Employer NM Harrisburg Inc	Occupatio Special A		
Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 882.00	
Full Name (Last, First, Middle Initial) Lance P Franczyk			Date of Receipt
Mailing Address 2224 E 24th Street			M M / D D / Y Y Y Y Y Y Y 1 1 1 1 5 2 0 0 9
City Tulsa	State OK	Zip Code	Transaction ID: 20091118163132-5
FEC ID number of contributing federal political committee.	C	74114-2912	Amount of Each Receipt this Period 42.00
Name of Employer Pillars Fncl LLC	Occupatio Special A		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		e Year-to-Date ▼ 210.00	
SUBTOTAL of Receipts This Page (optional	l		126.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 141 / 5 / 4 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any personess of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	rance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Robert T Frieling			Date of Receipt
Mailing Address 5 Gennaro Circle			07 15 2009
City Wayland	State MA	Zip Code 01778-4436	Transaction ID: 20090720-1206-13- Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer Self-Employed	Occupation General I	nsurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2625.00	
Full Name (Last, First, Middle Initial) Robert T Frieling			Date of Receipt
Mailing Address 5 Gennaro Circle			07 31 2009
City Wayland	State MA	Zip Code 01778-4436	Transaction ID: 20090804-1204-10- Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer Self-Employed	Occupation General I	nsurance Agent	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 2625.00	
Full Name (Last, First, Middle Initial) Robert T Frieling			Date of Receipt
Mailing Address 5 Gennaro Circle			0 8 1 5 2 0 0 9
City Wayland	State MA	Zip Code 01778-4436	Transaction ID: 20090819-29-14-0
FEC ID number of contributing federal political committee.	C	01770-9450	Amount of Each Receipt this Period
Name of Employer Self-Employed	Occupation General I	nsurance Agent	
Receipt For: Primary General Other (specify) ▼	'	Year-to-Date ▼ 2625.00	
SUBTOTAL of Receipts This Page (options	al)		375.00

or for commercial purposes, oth NAME OF COMMITTEE (In The Northwestern Mutual Full Name (Last, First, Middle Robert T Frieling Mailing Address 5 Gennal City Wayland FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary Other (specify) Wayland FEC ID number of contributing Mailing Address 5 Gennal City Wayland FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Primary General City Wayland FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General City Full Name (Last, First, Middle Robert T Frieling) Mailing Address 5 Gennal City	er than using the name and ad Full) Il Life Insurance Company Il Life Ins	Zip Code 01778-4436 Zip Code 01778-4436 Zip Code 01778-4436	Date of Receipt
Full Name (Last, First, Middle Robert T Frieling Mailing Address 5 Genna City Wayland FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary Gene Other (specify) Wayland FEC ID number of contributing federal political committee. Primary Gene Other (specify) Wayland FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary Gene Other (specify) Full Name (Last, First, Middle Robert T Frieling) Receipt For: Primary Gene Other (specify) Mailing Address 5 Genna Self-Employed Full Name (Last, First, Middle Robert T Frieling) Mailing Address 5 Genna Self-Employed Full Name (Last, First, Middle Robert T Frieling) Mailing Address 5 Genna Self-Employed	Il Life Insurance Company e Initial) ro Circle State MA Occupatic General Aggregate e Initial) ro Circle State MA C C C C C C C C C C C C C	Zip Code 01778-4436 On Insurance Agent e Year-to-Date ▼ 2625.00 Zip Code 01778-4436	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
A. Robert T Frieling Mailing Address 5 Genna City Wayland FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary Other (specify) Full Name (Last, First, Middle Robert T Frieling) Mailing Address 5 Genna City Wayland FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary Other (specify) Full Name (Last, First, Middle Robert T Frieling) Mailing Address 5 Genna City Ct. Full Name (Last, First, Middle Robert T Frieling) Mailing Address 5 Genna City	State MA Occupation General Aggregate Pro Circle State MA Occupation General Aggregate C State MA	01778-4436 Insurance Agent e Year-to-Date ▼ 2625.00 Zip Code 01778-4436	Transaction ID: 20090902-29-14-46 Amount of Each Receipt this Period Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Wayland FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Robert T Frieling Mailing Address 5 Gennal City Wayland FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Robert T Frieling Mailing Address 5 Gennal City	State MA Occupation General Aggregate e Initial) ro Circle State MA Occupation General Aggregate C	01778-4436 Insurance Agent e Year-to-Date ▼ 2625.00 Zip Code 01778-4436	Date of Receipt M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Wayland FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Robert T Frieling Mailing Address 5 Gennal City Wayland FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Robert T Frieling Mailing Address 5 Gennal City Mailing Address 5 Gennal City	MA Occupation General Aggregate e Initial) ro Circle State MA Occupation General Aggregate C	01778-4436 Insurance Agent e Year-to-Date ▼ 2625.00 Zip Code 01778-4436	Date of Receipt M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middl Robert T Frieling Mare of Employer Self-Employed Full Name (Last, First, Middl Robert T Frieling Mailing Address 5 Genna City Wayland FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary Gene Other (specify) ▼ Full Name (Last, First, Middl Robert T Frieling Mailing Address 5 Genna City	Occupation General Aggregate Aggregate Initial) ro Circle State MA C	Insurance Agent e Year-to-Date 2625.00 Zip Code 01778-4436	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middl Robert T Frieling Mailing Address 5 Genna City Wayland FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middl Robert T Frieling Mailing Address 5 Genna City C:	General Aggregate e Initial) ro Circle State MA C	Insurance Agent e Year-to-Date 2625.00 Zip Code 01778-4436	Transaction ID: 20090921-29-16-16 Amount of Each Receipt this Period
Primary General Other (specify) ▼ Full Name (Last, First, Middl Robert T Frieling Mailing Address 5 Genna City Wayland FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middl Robert T Frieling Mailing Address 5 Genna City	e Initial) ro Circle State MA C	Zip Code 01778-4436	Transaction ID: 20090921-29-16-16 Amount of Each Receipt this Period
Robert T Frieling Mailing Address 5 Genna City Wayland FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Robert T Frieling Mailing Address 5 Genna City	ro Circle State MA C	01778-4436	Transaction ID: 20090921-29-16-16 Amount of Each Receipt this Period
City Wayland FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Robert T Frieling Mailing Address 5 Genna City	State MA	01778-4436	7 Transaction ID: 20090921-29-16-16 Amount of Each Receipt this Period
Wayland FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Robert T Frieling Mailing Address 5 Gennal City	MA C	01778-4436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary Other (specify) Full Name (Last, First, Middl Robert T Frieling Mailing Address 5 Genna City	C		
Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middl Robert T Frieling Mailing Address 5 Genna City	Occupation		
Primary General Other (specify) ▼ Full Name (Last, First, Middl Robert T Frieling Mailing Address 5 Genna City	'	on Insurance Agent	
Mailing Address 5 Genna City		e Year-to-Date ▼ 2625.00	
Mailing Address 5 Genna City	e Initial)		Date of Receipt
•	ro Circle		09 30 7 7 7 7 7
Wayland	State MA	Zip Code 01778-4436	Transaction ID: 20091008103448-29 Amount of Each Receipt this Period
FEC ID number of contribution federal political committee.		11770 4400	125.00
Name of Employer Self-Employed	Occupation General	on Insurance Agent	
Receipt For: Primary Gene Other (specify) ▼		e Year-to-Date ▼ 2625.00	
SUBTOTAL of Receipts This F	l		375.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 143 / 574 (check only one) X 11a
	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ 4 .	Full Name (Last, First, Middle Initial) Robert T Frieling Mailing Address 5 Gennaro Circle			Date of Receipt 1 0 1 5 2 0 0 9
	City Wayland	State MA	Zip Code 01778-4436	Transaction ID: 2009102293957-29 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼		Insurance Agent e Year-to-Date ▼ 2625.00	
- В.	Full Name (Last, First, Middle Initial) Robert T Frieling Mailing Address 5 Gennaro Circle			Date of Receipt 10 31 2009
	City	State	Zip Code	Transaction ID: 20091105152043-29
	Wayland FEC ID number of contributing federal political committee.	MA C	01778-4436	Amount of Each Receipt this Period 125.00
	Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 2625.00	
- c.	Full Name (Last, First, Middle Initial) Robert T Frieling			Date of Receipt
	Mailing Address 5 Gennaro Circle			11 15 2009
	City	State	Zip Code	Transaction ID: 20091118163132-29
	Wayland FEC ID number of contributing federal political committee.	C	01778-4436	Amount of Each Receipt this Period 125.00
	Name of Employer Self-Employed	Occupation General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2625.00	
	SUBTOTAL of Receipts This Page (optional) .			375.00
Γ	TOTAL This Period (last page this line number	r only)		

Ar			for each category of the Detailed Summary Page	(check only one) X 11a
	y information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ice Company	Federal PAC	
	Full Name (Last, First, Middle Initial) Sheila M. Gavin			Date of Receipt
	Mailing Address 5735 N Crestwood Blv			07 15 2009
	Clandala	State WI	Zip Code	Transaction ID: 20090720-1077-13-0
	Glendale FEC ID number of contributing		53209-4309	Amount of Each Receipt this Period
	federal political committee.	C		27.00
	Name of Employer NML	Occupatio Asst Gc	n & Asst Sec	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 447.00	
_	Full Name (Last, First, Middle Initial) Sheila M. Gavin			Date of Receipt
	Mailing Address 5735 N Crestwood Blv	/		0 7 3 1 2 0 0 9
	City	State	Zip Code	Transaction ID: 20090804-1075-10-0
	Glendale	WI	53209-4309	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		27.00
	Name of Employer NML	Occupatio Asst Gc	n & Asst Sec	
	Receipt For:	1	e Year-to-Date ▼	
	Primary General Other (specify) ▼		447.00	
_	Full Name (Last, First, Middle Initial) Sheila M. Gavin			Date of Receipt
	Mailing Address 5735 N Crestwood Blv	/		0 8 1 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 20090819-1141-14-15
	Glendale	WI	53209-4309	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		27.00
	Name of Employer NML	Occupatio Asst Gc	n & Asst Sec	
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼		447.00	
	UBTOTAL of Receipts This Page (optional)	1		81.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 145 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	lay not be sold or used by any pers ldress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ce Company	y Federal PAC	
A.	Full Name (Last, First, Middle Initial) Sheila M. Gavin			Date of Receipt
	Mailing Address 5735 N Crestwood Blv	/		08 / 31 / 2009
	Clandala	State	Zip Code	Transaction ID: 20090902-1141-15-1
	Glendale FEC ID number of contributing federal political committee.	C	53209-4309	Amount of Each Receipt this Period 27.00
	Name of Employer NML	Occupation	on & Asst Sec	
	Receipt For: Primary General Other (specify) ▼	, '	e Year-to-Date ▼ 447.00	
В.	Full Name (Last, First, Middle Initial) Sheila M. Gavin			Date of Receipt
	Mailing Address 5735 N Crestwood Blv	/		09 15 Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20090921-1131-17-1
	Glendale	WI	53209-4309	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		27.00
	Name of Employer NML	Occupation Asst Gc	on & Asst Sec	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 447.00	
C.	Full Name (Last, First, Middle Initial) Sheila M. Gavin			Date of Receipt
	Mailing Address 5735 N Crestwood Blv			09 / 30 / 2009
	City <u>G</u> lendale	State WI	Zip Code 53209-4309	Transaction ID: 20091008104013-1058
	FEC ID number of contributing federal political committee.	C	33209-4309	Amount of Each Receipt this Period 27.00
	Name of Employer NML	Occupation Asst Gc	on & Asst Sec	
	Receipt For: Primary General Other (specify) ▼	, '	e Year-to-Date ▼ 447.00	
	SUBTOTAL of Receipts This Page (optional) .	1		81.00
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 146 / 574 (check only one) X 11a
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	ly not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	y Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Sheila M. Gavin			Date of Receipt
	Mailing Address 5735 N Crestwood Bl		10 15 2009	
	City Glendale	State WI	Zip Code 53209-4309	Transaction ID: 20091015164625-1056 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		27.00
	Name of Employer NML	Occupation Asst Gc	on & Asst Sec	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 447.00	
- В.	Full Name (Last, First, Middle Initial) Sheila M. Gavin			Date of Receipt
	Mailing Address 5735 N Crestwood Bl	V		10 31 2009
	City	State	Zip Code	Transaction ID: 20091105152628-1056
	<u>Glendale</u>	WI	53209-4309	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		27.00
	Name of Employer NML	Occupation Asst Gc	on & Asst Sec	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	447.00	
с. С.	Full Name (Last, First, Middle Initial) Sheila M. Gavin			Date of Receipt
	Mailing Address 5735 N Crestwood Bl	V		1 1 1 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 2009111816423-1055
	Glendale	WI	53209-4309	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		27.00
	Name of Employer NML	- '	& Asst Sec	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 447.00	
	SUBTOTAL of Receipts This Page (optional) .			81.00
f	TOTAL This Period (last page this line numbe		<u> </u>	

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 147 / 574 (check only one) X 11a
or fo	r commercial purposes, other than using th	Statements ma le name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\ \	IAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	/ Federal PAC	
. <u>T</u>	full Name (Last, First, Middle Initial)			Date of Receipt
_	Mailing Address 5421 N Idlewild Aven			07 15 2009
	^{Sity} Vhitefish Bay	State WI	Zip Code 53217-5331	Transaction ID: 20090720-645-13-0 Amount of Each Receipt this Period
F	EC ID number of contributing ederal political committee.	C		25.00
<u> </u>	lame of Employer IML	Occupation VP Field	on Comp & Plg	
F	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 525.00	
	rull Name (Last, First, Middle Initial)			Date of Receipt
N	Mailing Address 5421 N Idlewild Aven	ue		07
	Dity	State	Zip Code	Transaction ID: 20090804-645-10-0
_	Whitefish Bay	WI	53217-5331	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		25.00
N	lame of Employer IML	Occupation VP Field	n Comp & Plg	
F	Receipt For:	- '	e Year-to-Date ▼	
	Primary General Other (specify) ▼	1 1	525.00	
	ull Name (Last, First, Middle Initial)			Date of Receipt
N	Mailing Address 5421 N Idlewild Aven	ue		08 15 2009
	City	State	Zip Code	Transaction ID: 20090819-712-14-15
	Whitefish Bay	WI	53217-5331	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		25.00
_	lame of Employer IML	Occupation VP Field	on Comp & Plg	
F	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 525.00	
SIII	BTOTAL of Receipts This Page (optional)	1		75.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 148 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insural	ne name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Timothy J. Gerend Mailing Address 5421 N Idlewild Aven	ue	Date of Receipt
City Whitefish Bay	State Zip Code WI 53217-5331	0 8 3 1 2 0 0 9 Transaction ID: 20090902-712-15-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation VP Field Comp & Plg Aggregate Year-to-Date ▼ 525.00	
Full Name (Last, First, Middle Initial) Timothy J. Gerend Mailing Address 5421 N Idlewild Aven	ue	Date of Receipt 0 9 1 5 2 0 0 9
City	State Zip Code	Transaction ID: 20090921-708-17-1
Whitefish Bay FEC ID number of contributing federal political committee.	WI 53217-5331	Amount of Each Receipt this Period 25.00
Name of Employer NML	Occupation VP Field Comp & Plg	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	
Full Name (Last, First, Middle Initial) Timothy J. Gerend		Date of Receipt
Mailing Address 5421 N Idlewild Aven		09 / 30 / 4 2009
City Whitefish Bay	State Zip Code WI 53217-5331	Transaction ID: 20091008104013-634 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer NML	Occupation VP Field Comp & Plg	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	
		75.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 149 / 574 (check only one) X
A	Any information copied from such Reports and or for commercial purposes, other than using t	Statements ma he name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	nce Company	/ Federal PAC	
∠ 4.	Full Name (Last, First, Middle Initial) Timothy J. Gerend			Date of Receipt
	Mailing Address 5421 N Idlewild Aver			10 15 2009
	City Whitefish Bay	State WI	Zip Code 53217-5331	Transaction ID: 20091015164625-633 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer NML	Occupation VP Field	on Comp & Plg	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 525.00	
_ 3.	Full Name (Last, First, Middle Initial) Timothy J. Gerend			Date of Receipt
	Mailing Address 5421 N Idlewild Aver	nue		10 31 2009
	City	State	Zip Code	Transaction ID: 20091105152628-633
	Whitefish Bay	WI	53217-5331	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer NML	Occupatio VP Field	n Comp & Plg	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify)		525.00	
_	Full Name (Last, First, Middle Initial) Timothy J. Gerend			Date of Receipt
	Mailing Address 5421 N Idlewild Aver	nue		1 1 1 5 2 0 0 9
	City Whitefish Bay	State WI	Zip Code 53217-5331	Transaction ID: 2009111816423-633
	FEC ID number of contributing federal political committee.	C	33217-3331	Amount of Each Receipt this Period 25.00
	Name of Employer NML	Occupation VP Field	n Comp & Plg	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 525.00	
	SUBTOTAL of Receipts This Page (optional)	<u> </u>		75.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 150 / 574 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	und Statements may not be sold or used by any persong the name and address of any political committee to urance Company Federal PAC	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Walter M. Givler Mailing Address 13040 Hawthorne	Lane	Date of Receipt 0 7 3 1 2 0 0 9
City New Berlin	State Zip Code WI 53151-8742	Transaction ID: 20090804-640-10-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	15.00
Receipt For: Primary General Other (specify)	VP Acctg Policy Aggregate Year-to-Date ▼ 315.00	
Full Name (Last, First, Middle Initial) Walter M. Givler Mailing Address 13040 Hawthorne	Lane	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20090819-707-14-15
New Berlin	WI 53151-8742	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer NML	Occupation VP Acctg Policy	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	
Full Name (Last, First, Middle Initial) Walter M. Givler	,	Date of Receipt
Mailing Address 13040 Hawthorne		08 7 0 0 0 9
City New Berlin	State Zip Code WI 53151-8742	Transaction ID: 20090902-707-15-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer NML	Occupation VP Acctg Policy	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	
SUBTOTAL of Receipts This Page (option	al)	45.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 151 / 574 (check only one) X
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma ne name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insural	nce Company	/ Federal PAC	
۱ A .	Full Name (Last, First, Middle Initial) Walter M. Givler			Date of Receipt
	Mailing Address 13040 Hawthorne La	ne		09 / 15 / 2009
	City New Berlin	State WI	Zip Code 53151-8742	Transaction ID: 20090921-703-17-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		15.00
	Name of Employer NML	Occupation VP Accts		
	Receipt For: Primary General Other (specify) ▼	- '	e Year-to-Date ▼ 315.00	
В.	Full Name (Last, First, Middle Initial) Walter M. Givler Mailing Address 13040 Hawthorne La			Date of Receipt
				09 30 2009
	City New Berlin	State WI	Zip Code 53151-8742	Transaction ID: 20091008104013-629 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		15.00
	Name of Employer NML	Occupation VP Accts		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 315.00	
	Full Name (Last, First, Middle Initial)			
C.	Walter M. Givler Mailing Address 13040 Hawthorne Lai	ne		Date of Receipt 1 0 1 5 2 0 0 9
	City New Berlin	State WI	Zip Code	Transaction ID: 20091015164625-628
	FEC ID number of contributing federal political committee.	C	53151-8742	Amount of Each Receipt this Period 15.00
	Name of Employer NML	Occupation VP Accts		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 315.00	
	SUBTOTAL of Receipts This Page (optional)	1		45.00
	TOTAL This Period (last page this line number	er only)		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 152/5/4 (check only one)
Any information copied from such Reports or for commercial purposes, other than usin	and Statements mang the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Inst	urance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Walter M. Givler			Date of Receipt
Mailing Address 13040 Hawthorne	10 31 YYYY 2009		
City New Berlin	State WI	Zip Code 53151-8742	Transaction ID: 20091105152628-626 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer NML	Occupatio VP Accto		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 315.00	
Full Name (Last, First, Middle Initial) Walter M. Givler			Date of Receipt
Mailing Address 13040 Hawthorne Lane			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City New Berlin	State WI	Zip Code 53151-8742	Transaction ID: 2009111816423-628 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer NML	Occupatio VP Accto		
Receipt For: Primary General Other (specify) ▼	`	Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Robert P. Glazier			Date of Receipt
Mailing Address W299S8578 State	e Road		10 15 2009
City Mukwonago	State WI	Zip Code 53149	Transaction ID: 20091015164625-51
FEC ID number of contributing federal political committee.	C	33149	Amount of Each Receipt this Period 13.00
Name of Employer NML	Occupatio Dir Act S		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 237.00	
SUBTOTAL of Receipts This Page (option			43.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 153 / 574 (check only one) X 11a
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Compan	/ Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Robert P. Glazier			Date of Receipt
	Mailing Address W299S8578 State Ro	ad		10 31 2009
	City <u>Mukwonago</u>	State WI	Zip Code 53149	Transaction ID: 20091105152628-517 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		13.00
	Name of Employer NML	Occupation Dir Act S		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 237.00	
В.	Full Name (Last, First, Middle Initial) Robert P. Glazier			Date of Receipt
	Mailing Address W299S8578 State Ro	11 1 15 2009		
	City Mukwonago	State WI	Zip Code 53149	Transaction ID: 2009111816423-518 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00140	13.00
	Name of Employer NML	Occupation Dir Act S		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 237.00	
C.	Full Name (Last, First, Middle Initial) Mitchell B Glover			Date of Receipt
	Mailing Address 6700 Old Darby Trail	Northeast		07 15 2009
	City Ada	State MI	Zip Code 49301-8360	Transaction ID: 20090720-1204-13-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		42.00
	Name of Employer Western MI Group LLC	Occupation Special		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1297.00	
	SUBTOTAL of Receipts This Page (optional)	1)	68.00
	TOTAL This Period (last page this line numbe	r only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 154 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
,	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ce Company	/ Federal PAC	
∠ A .	Full Name (Last, First, Middle Initial) Mitchell B Glover			Date of Receipt
	Mailing Address 6700 Old Darby Trail	Northeast		07 31 2009
	City Ada	State MI	Zip Code 49301-8360	Transaction ID: 20090804-1202-10-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Western MI Group LLC	Occupation Special A		
	Receipt For: Primary General Other (specify) ▼	- ' 	e Year-to-Date ▼ 1297.00	
– В.	Full Name (Last, First, Middle Initial) Mitchell B Glover			Date of Receipt
	Mailing Address 6700 Old Darby Trail	08 / 05 / 2009		
	City Ada	State MI	Zip Code 49301-8360	Transaction ID: 20090819-27-14-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	49301-0300	42.00
	Name of Employer Western MI Group LLC	Occupation Special A		
	Receipt For: Primary General Other (specify) ▼	T ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	e Year-to-Date ▼ 1297.00	
_ C.	Full Name (Last, First, Middle Initial) Mitchell B Glover			Date of Receipt
-	Mailing Address 6700 Old Darby Trail	Northeast		08 31 2009
	City Ada	State MI	Zip Code 49301-8360	Transaction ID: 20090902-27-14-46 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1	42.00
	Name of Employer Western MI Group LLC	Occupation Special A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1297.00	
	SUBTOTAL of Receipts This Page (optional) .	1		126.00
	TOTAL This Period (last page this line number			

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 155 / 574 (check only one) X 11a
7	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any pers dress of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ce Company	/ Federal PAC	
∠ A .	Full Name (Last, First, Middle Initial) Mitchell B Glover			Date of Receipt
	Mailing Address 6700 Old Darby Trail	Northeast		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Ada	State MI	Zip Code 49301-8360	Transaction ID: 20090921-27-16-16 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer Western MI Group LLC	Occupatio Special A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1297.00	
– В.	Full Name (Last, First, Middle Initial) Mitchell B Glover			Date of Receipt
	Mailing Address 6700 Old Darby Trail	09 / 09 / 2009		
	City Ada	State MI	Zip Code 49301-8360	Transaction ID: 20091008103448-27 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	43001 6300	125.00
	Name of Employer Western MI Group LLC	Occupatio Special A		
	Receipt For: Primary General Other (specify) ▼	- ' ' ' 	e Year-to-Date ▼ 1297.00	
_ C.	Full Name (Last, First, Middle Initial) Mitchell B Glover			Date of Receipt
	Mailing Address 6700 Old Darby Trail	Northeast		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Ada	State MI	Zip Code 49301-8360	Transaction ID: 2009102293957-27 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1	125.00
	Name of Employer Western MI Group LLC	Occupation Special A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1297.00	
	SUBTOTAL of Receipts This Page (optional) .	1		375.00
ı	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	A)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 156/5/4 (check only one) X 11a		
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	<u> </u>				
Full Name (Last, First, Middle Initial) Mitchell B Glover			Date of Receipt		
City Ada	State MI	Zip Code 49301-8360	1 0 3 1 2 0 0 9 Transaction ID: 20091105152043-27 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		125.00		
Name of Employer Western MI Group LLC	Occupation Special A				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1297.00			
Full Name (Last, First, Middle Initial) Mitchell B Glover			Date of Receipt		
Mailing Address 6700 Old Darby Tr	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City Ada	State MI	Zip Code 49301-8360	Transaction ID: 20091118163132-27 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		125.00		
Name of Employer Western MI Group LLC	Occupation Special A				
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1297.00			
Full Name (Last, First, Middle Initial) Mark J. Gmach			Date of Receipt		
Mailing Address 14315 Radiant Co	urt		M M / D D / Y Y Y Y Y 1 1 1 5 2 0 0 9		
City Brookfield	State WI	Zip Code 53005-7073	Transaction ID: 2009111816423-895 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	333337070	10.00		
Name of Employer NML	Occupation Rvp Field				
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 210.00			
SUBTOTAL of Receipts This Page (option	ıal)		260.00		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 157 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16		
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	and Statements may not be sold or used by any pers g the name and address of any political committee to urance Company Federal PAC	on for the purpose of soliciting contributions		
Full Name (Last, First, Middle Initial) Deborah A. Gonnella Mailing Address 11924 W Scherrei	Deborah A. Gonnella			
City Franklin FEC ID number of contributing	State Zip Code WI 53132-1624	Transaction ID: 2009111816423-1075 Amount of Each Receipt this Period 10.00		
Receipt For: Primary Other (specify)	Occupation IS Cons Aggregate Year-to-Date ▼ 210.00]		
Full Name (Last, First, Middle Initial) Kimberley Goode Mailing Address 2485 W Fairy Cha	Date of Receipt 0 7 1 5 2 0 0 9			
City River Hills FEC ID number of contributing federal political committee.	State Zip Code WI 53217	Transaction ID: 20090720-588-13-0 Amount of Each Receipt this Period 63.00		
Name of Employer NML Receipt For: Primary General Other (specify)	Occupation VP Comm Aggregate Year-to-Date ▼ 1263.00	1		
Full Name (Last, First, Middle Initial) Kimberley Goode Mailing Address 2485 W Fairy Cha	sm R	Date of Receipt		
City River Hills FEC ID number of contributing federal political committee.	State Zip Code WI 53217	Transaction ID: 20090804-588-10-0 Amount of Each Receipt this Period 63.00		
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation VP Comm Aggregate Year-to-Date ▼ 1263.00			
SUBTOTAL of Receipts This Page (option	al)	136.00		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 158 / 574 (check only one) X	
A 0	ny information copied from such Reports and for commercial purposes, other than using t	l Statements ma he name and ad	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura				
۷.	Full Name (Last, First, Middle Initial) Kimberley Goode			Date of Receipt	
	Mailing Address 2485 W Fairy Chasn	08 / 15 / Y Y Y Y Y Y Y			
	City <u>River Hills</u>	State WI	Zip Code 53217	Transaction ID: 20090819-656-14-15 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		63.00	
	Name of Employer NML	Occupatio VP Com			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1263.00		
	Full Name (Last, First, Middle Initial) Kimberley Goode	Date of Receipt			
	Mailing Address 2485 W Fairy Chasn	08 31 2009			
	City State		Zip Code	Transaction ID: 20090902-656-15-1	
	River Hills	WI	53217	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.			63.00	
	Name of Employer NML	Occupatio VP Com			
	Receipt For:	Aggregate	e Year-to-Date 🔻		
	Primary General Other (specify) ▼		1263.00		
_	Full Name (Last, First, Middle Initial) Kimberley Goode			Date of Receipt	
	Mailing Address 2485 W Fairy Chasm R			09 15 2009	
	City River Hills	State WI	Zip Code 53217	Transaction ID: 20090921-654-17-1 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		63.00	
	Name of Employer Occupation VP Company				
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1263.00		
				189.00	

Γ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 159 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
5	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	not be sold or used by any personal dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insuran	nce Company	Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Kimberley Goode			Date of Receipt
	Mailing Address 2485 W Fairy Chasm	09 30 2009		
	City River Hills	State WI	Zip Code 53217	Transaction ID: 20091008104013-580 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33217	63.00
	Name of Employer NML	Occupation VP Comr		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1263.00	
— В.	Full Name (Last, First, Middle Initial) Kimberley Goode			Date of Receipt
	Mailing Address 2485 W Fairy Chasm	10 15 2009		
	City State		Zip Code	Transaction ID: 20091015164625-579
	River Hills	WI	53217	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		63.00
	Name of Employer NML	Occupation VP Comr		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	1263.00	
С. С.	Full Name (Last, First, Middle Initial) Kimberley Goode	1		Date of Receipt
	Mailing Address 2485 W Fairy Chasm	R		10 31 7 2009
	City	State	Zip Code	Transaction ID: 20091105152628-579
	River Hills FEC ID number of contributing federal political committee.	C	53217	Amount of Each Receipt this Period 63.00
	Name of Employer NML	Occupation VP Comr		
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1263.00	
	SUBTOTAL of Receipts This Page (optional)	1		189.00
	TOTAL This Period (last page this line number		<u> </u>	

	CHEDULE A (FEC Form 3X EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 160 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar	y information copied from such Reports and for commercial purposes, other than using to NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	d Statements may not be sold or used by any pers the name and address of any political committee t ance Company Federal PAC	son for the purpose of soliciting contributions o solicit contributions from such committee.
. ∠	Full Name (Last, First, Middle Initial) Kimberley Goode		Date of Receipt
١.	Mailing Address 2485 W Fairy Chasr	1 1 1 5 2 0 0 9	
	City River Hills	State Zip Code WI 53217	Transaction ID: 2009111816423-580 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	63.00
	Name of Employer NML	Occupation VP Comm	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1263.00	
. –	Full Name (Last, First, Middle Initial) Patrick K Gores	Date of Receipt	
	Mailing Address 2702 28th Avenue S	07 15 2009	
	City Fargo	State Zip Code ND 58103-5045	Transaction ID: 20090720-1196-13-1
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 42.00
	Name of Employer Self-Employed	Occupation General Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1672.00	
	Full Name (Last, First, Middle Initial) Patrick K Gores		Date of Receipt
	Mailing Address 2702 28th Avenue S	07 31 2009	
	City	State Zip Code	Transaction ID: 20090804-1194-10-0
	Fargo FEC ID number of contributing federal political committee.	ND 58103-5045	Amount of Each Receipt this Period 42.00
	Name of Employer Self-Employed	Occupation General Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1672.00	
	UBTOTAL of Receipts This Page (optional		147.00

An	y information copied from such Reports and or commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may		13 14 15 16 17			
\geq	NAME OF COMMITTEE (In Full)	ie name and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions			
<u>/</u>	, ,	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance Company Federal PAC					
Α.	Full Name (Last, First, Middle Initial) Patrick K Gores			Date of Receipt			
	Mailing Address 2702 28th Avenue So		08 / 15 / 2009				
	City	State	Zip Code	Transaction ID: 20090819-19-14-0			
	Fargo	ND	58103-5045	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		42.00			
	Name of Employer Self-Employed	Occupation General I	nsurance Agent				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1672.00				
— В.	Full Name (Last, First, Middle Initial) Patrick K Gores			Date of Receipt			
	Mailing Address 2702 28th Avenue So	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
	City	State	Zip Code	Transaction ID: 7044F159E4458E8532			
	<u>Fargo</u>	ND	58103-5045	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		1000.00			
	Name of Employer Self-Employed	Occupation General I	nsurance Agent				
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary ☐ General Other (specify) ▼	0 0	1672.00				
 C.	Full Name (Last, First, Middle Initial) Patrick K Gores			Date of Receipt			
	Mailing Address 2702 28th Avenue So	outhwest		08 31 Y Y Y Y Y Y			
	City	State	Zip Code	Transaction ID: 20090902-19-14-46			
	Fargo	ND	58103-5045	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		42.00			
	Name of Employer Self-Employed	Occupation General I	nsurance Agent				
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼	0 0	1672.00				
	JBTOTAL of Receipts This Page (optional).			1084.00			

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 162 / 574 (check only one) X	
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	d Statements may not be sold or used by any personant the name and address of any political committee to ance Company Federal PAC	on for the purpose of soliciting contributions	
Full Name (Last, First, Middle Initial) Tom Goris, Jr. Mailing Address 8042 Cheverny Driv			
City Mequon FEC ID number of contributing federal political committee.	State Zip Code WI 53097-2532	Transaction ID: 20090720-1217-13-1 Amount of Each Receipt this Period 125.00	
Name of Employer Goris Fncl Grp Inc Receipt For: Primary General Other (specify) ▼	Occupation Special Agent Aggregate Year-to-Date 2625.00		
Full Name (Last, First, Middle Initial) Tom Goris, Jr. Mailing Address 8042 Cheverny Driv	Date of Receipt 0 7 3 1 2 0 0 9		
City Mequon FEC ID number of contributing federal political committee.	State Zip Code WI 53097-2532	Transaction ID: 20090804-1214-10-0 Amount of Each Receipt this Period 125.00	
Name of Employer Goris Fncl Grp Inc Receipt For: Primary General Other (specify) ▼	Occupation Special Agent Aggregate Year-to-Date 2625.00		
Full Name (Last, First, Middle Initial) Tom Goris, Jr. Mailing Address 8042 Cheverny Driv	e	Date of Receipt	
City Mequon FEC ID number of contributing federal political committee.	State Zip Code WI 53097-2532 C	Transaction ID: 20090819-39-14-0 Amount of Each Receipt this Period 125.00	
Name of Employer Goris Fncl Grp Inc Receipt For: Primary General Other (specify)	Occupation Special Agent Aggregate Year-to-Date 2625.00		
SUBTOTAL of Receipts This Page (optional)	375.00	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 163/5/4 (check only one)			
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may g the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	ırance Company	Federal PAC				
Full Name (Last, First, Middle Initial) Tom Goris, Jr.						
· · · · · · · · · · · · · · · · · · ·	Mailing Address 8042 Cheverny Drive					
City Mequon	State WI	Zip Code 53097-2532	0 8 3 1 2 0 0 9 Transaction ID: 20090902-39-14-46 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		125.00			
Name of Employer Goris Fncl Grp Inc	Occupatio Special A					
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2625.00				
Full Name (Last, First, Middle Initial) Tom Goris, Jr.	I		Date of Receipt			
Mailing Address 8042 Cheverny Drive			0 9 1 5 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City Meguon	State WI	Zip Code 53097-2532	Transaction ID: 20090921-40-16-16			
FEC ID number of contributing federal political committee.	C	33097-2332	Amount of Each Receipt this Period 125.00			
Name of Employer Goris Fncl Grp Inc	Occupatio Special A					
Receipt For: Primary General Other (specify) ▼	- ' ' -	e Year-to-Date ▼ 2625.00				
Full Name (Last, First, Middle Initial) Tom Goris, Jr.			Date of Receipt			
Mailing Address 8042 Cheverny Dr	ive		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City Meguon	State WI	Zip Code 53097-2532	Transaction ID: 20091008103448-40			
FEC ID number of contributing federal political committee.	C	33097-2332	Amount of Each Receipt this Period 125.00			
Name of Employer Goris Fncl Grp Inc	Occupatio Special A					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2625.00				
SUBTOTAL of Receipts This Page (option	ıal)		375.00			

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 164 / 574 (check only one) X 11a
, A	ny information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insuran	ice Company	Federal PAC	
۷.	Full Name (Last, First, Middle Initial) Tom Goris, Jr.	Date of Receipt		
	Mailing Address 8042 Cheverny Drive	Ctata	7in Code	10 15 2000
	City Mequon	State WI	Zip Code 53097-2532	Transaction ID: 2009102293957-40 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer Goris Fncl Grp Inc	Occupation Special A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2625.00	
	Full Name (Last, First, Middle Initial) Tom Goris, Jr.			Date of Receipt
	Mailing Address 8042 Cheverny Drive			10 31 2009
	City	State	Zip Code	Transaction ID: 20091105152043-40
	Mequon FEC ID number of contributing federal political committee.	C	53097-2532	Amount of Each Receipt this Period 125.00
	Name of Employer Goris Fncl Grp Inc	Occupation Special A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2625.00	
- :.	Full Name (Last, First, Middle Initial) Tom Goris, Jr.			Date of Receipt
	Mailing Address 8042 Cheverny Drive			11 15 2009
	City Meguon	State WI	Zip Code 53097-2532	Transaction ID: 20091118163132-40 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33037-2332	125.00
	Name of Employer Goris Fncl Grp Inc	Occupation Special A		
	Receipt For: Primary General Other (specify) ▼	- ' '	Year-to-Date ▼ 2625.00	
	SUBTOTAL of Receipts This Page (optional) .	1		375.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 165 / 574 (check only one) X
4	Any information copied from such Reports and or for commercial purposes, other than using the	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	nce Company	Federal PAC	
۷.	Full Name (Last, First, Middle Initial) Karl G. Gouverneur			Date of Receipt
	Mailing Address 12895 N Cobblestone	07 15 7 2009		
	City <u>Meguon</u>	State WI	Zip Code 53097-1812	Transaction ID: 20090720-1143-13-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00007 1012	20.00
	Name of Employer NML	Occupatio VP & Ch	n ief Tech Architect	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 420.00	
_ 3.	Full Name (Last, First, Middle Initial) Karl G. Gouverneur			Date of Receipt
	Mailing Address 12895 N Cobblestone		07 31 YYYY 2009	
	City	State	Zip Code	Transaction ID: 20090804-1141-10-0
	Mequon	WI	53097-1812	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer NML Occ VP			20.00
			n ief Tech Architect	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		420.00	
- ;.	Full Name (Last, First, Middle Initial) Karl G. Gouverneur			Date of Receipt
	Mailing Address 12895 North Cobbles	stone		0 8
	City	State WI	Zip Code	Transaction ID: 20090819-1207-14-15
	Mequon FEC ID number of contributing federal political committee.	C	53097-1812	Amount of Each Receipt this Period 20.00
	Name of Employer Occupation VP & Ch		n ief Tech Architect	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 420.00	
Γ	SUBTOTAL of Receipts This Page (optional)			60.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 166 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial)		T ederal i Ao	Date of Passint
٦.	Karl G. Gouverneur Mailing Address 12895 North Cobblest	Date of Receipt M M D D Y Y Y Y Y Y Y		
	City <u>Mequon</u>	State WI	Zip Code 53097-1812	Transaction ID: 20090902-1207-15-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer NML	Occupatio VP & Ch	n ief Tech Architect	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 420.00	
- В.	Full Name (Last, First, Middle Initial) Karl G. Gouverneur Mailing Address 12895 North Cobblest	Date of Receipt		
	City	State	Zip Code	0 9 1 5 2 0 0 9 Transaction ID: 20090921-1196-17-1
	Mequon FEC ID number of contributing federal political committee.	C	53097-1812	Amount of Each Receipt this Period 20.00
	Name of Employer NML	Occupatio VP & Ch	n ief Tech Architect	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 420.00	
- C.	Full Name (Last, First, Middle Initial) Karl G. Gouverneur			
	Mailing Address 12895 North Cobblest	09 30 2009		
	City Mequon	State WI	Zip Code 53097-1812	Transaction ID: 20091008104013-1123 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer NML	Occupatio VP & Ch	n ief Tech Architect	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 420.00	
	SUBTOTAL of Receipts This Page (optional)			60.00
f	TOTAL This Period (last page this line number	only)	•	

SCHEDULE A (FEC FOI	III 3A)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16//5/4 (check only one)		
Any information copied from such Re or for commercial purposes, other the	ports and Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) The Northwestern Mutual Lif	·				
Full Name (Last, First, Middle Init Karl G. Gouverneur	al)		Date of Receipt		
City <u>Mequon</u>	State WI	Zip Code 53097-1812	Transaction ID: 20091015164625-112 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		20.00		
Name of Employer NML	Occupatio VP & Ch	n ief Tech Architect			
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 420.00			
Full Name (Last, First, Middle Init Karl G. Gouverneur	al)		Date of Receipt		
Mailing Address 12895 North Cobblestone			10 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Meguon	State WI	Zip Code 53097-1812	Transaction ID: 20091105152628-112 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		20.00		
Name of Employer NML	Occupatio VP & Ch	n ief Tech Architect			
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 420.00			
Full Name (Last, First, Middle Init Karl G. Gouverneur	al)		Date of Receipt		
-					
City Mequon	State WI	Zip Code 53097-1812	Transaction ID: 2009111816423-1120		
FEC ID number of contributing federal political committee.	C	33037-1012	Amount of Each Receipt this Period 20.00		
Name of Employer NML	Occupatio VP & Ch	n ief Tech Architect			
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 420.00			
SUBTOTAL of Receipts This Page	(optional)		60.00		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 168 / 574 (check only one) X 11a
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Paul A. Gregory		y i ederal i AO	Date of Receipt
Α.	Mailing Address 3595 Candlewood Trai	M M / D D / Y Y Y Y Y Y 1 1 1 1 5 2 0 0 9		
	City <u>Marietta</u>	State GA	Zip Code 30066-4574	Transaction ID: 2009111816423-1109 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		10.00
	Name of Employer NML	Occupation Dir Field	on Asset Mgt	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 210.00	
В.	Full Name (Last, First, Middle Initial) John M. Grogan Mailing Address 706 W Acacia Road	Date of Receipt		
	City	State	Zip Code	0 7 1 5 2 0 0 9 Transaction ID: 20090720-1049-13-0
	Glendale FEC ID number of contributing federal political committee.	C	53217-4008	Amount of Each Receipt this Period 88.00
	Name of Employer NML	Occupation Pres & C	on CEO Wealth Mgmt	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1848.00	
с. С.	Full Name (Last, First, Middle Initial) John M. Grogan			Date of Receipt
	Mailing Address 706 W Acacia Road			07 31 7 2009
	City <u>G</u> lendale	State WI	Zip Code 53217-4008	Transaction ID: 20090804-1047-10-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		88.00
	Name of Employer NML	Occupation Pres & C	on CEO Wealth Mgmt	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1848.00	
	SUBTOTAL of Receipts This Page (optional)			186.00
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 169 / 574 (check only one) X 11a
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
_	Full Name (Last, First, Middle Initial)	se Company	/ Federal FAC	T
Α.	John M. Grogan Mailing Address 706 W Acacia Road			Date of Receipt M M D D Y Y Y Y Y Y Y Y
	City Glendale	State WI	Zip Code 53217-4008	Transaction ID: 20090819-1114-14-15 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		88.00
	Name of Employer NML	Occupation Pres & C	n CEO Wealth Mgmt	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1848.00	
- В.	Full Name (Last, First, Middle Initial) John M. Grogan Mailing Address 706 W Acacia Road			Date of Receipt
	City	State	Zip Code	0 8 3 1 2 0 0 9 Transaction ID: 20090902-1114-15-1
	Glendale FEC ID number of contributing federal political committee.	C	53217-4008	Amount of Each Receipt this Period 88.00
	Name of Employer NML	Occupation Pres & C	on CEO Wealth Mgmt	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1848.00]
- C.	Full Name (Last, First, Middle Initial) John M. Grogan	<u> </u>		Date of Receipt
	Mailing Address 706 W Acacia Road			09 15 / Y Y Y Y Y Y
	City Glendale	State WI	Zip Code 53217-4008	Transaction ID: 20090921-1105-17-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		88.00
	Name of Employer NML	Occupation Pres & C	n CEO Wealth Mgmt	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1848.00	
	SUBTOTAL of Receipts This Page (optional)			264.00
Ī	TOTAL This Period (last page this line number	only)	•	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 170 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may name and add	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insurance	e Company	Federal PAC	
Α.	Full Name (Last, First, Middle Initial) John M. Grogan			Date of Receipt
	Mailing Address 706 W Acacia Road			09 / 30 / 4 2009
	City Glendale	State WI	Zip Code 53217-4008	Transaction ID: 20091008104013-1032
	FEC ID number of contributing federal political committee.	C	33217-4000	Amount of Each Receipt this Period 88.00
	Name of Employer NML	Occupation Pres & C	n EO Wealth Mgmt	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1848.00	
- В.	Full Name (Last, First, Middle Initial) John M. Grogan Mailing Address 706 W Acacia Road			Date of Receipt
				10 15 2009
	City Glendale	State WI	Zip Code 53217-4008	Transaction ID: 20091015164625-1031 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30217 4000	88.00
	Name of Employer NML	Occupation Pres & C	n EO Wealth Mgmt	
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 1848.00	
С.	Full Name (Last, First, Middle Initial) John M. Grogan Mailing Address 706 W Acacia Road			Date of Receipt 10 31 2009
	City	State	Zip Code	Transaction ID: 20091105152628-1031
	Glendale FEC ID number of contributing federal political committee.	C	53217-4008	Amount of Each Receipt this Period 88.00
	Name of Employer NML	Occupation Pres & C	n EEO Wealth Mgmt	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1848.00	
	SUBTOTAL of Receipts This Page (optional)			264.00
T	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 171 / 574 (check only one) X
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	ly not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	/ Federal PAC	
Α.	Full Name (Last, First, Middle Initial) John M. Grogan			Date of Receipt
	Mailing Address 706 W Acacia Road			111 / 15 / 2009
	City <u>Glendale</u>	State WI	Zip Code 53217-4008	Transaction ID: 2009111816423-1030 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		88.00
	Name of Employer NML	Occupation Pres & C	on CEO Wealth Mgmt	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1848.00	
Б.	Full Name (Last, First, Middle Initial) Jon P Gruenstern Mailing Address 2155 Hickory Court			Date of Receipt
		Chaha	7:a Code	07 15 2009
	City Oshkosh	State WI	Zip Code 54901-2581	Transaction ID: 20090720-1185-13-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Self-Employed	Occupation General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 882.00	
- С.	Full Name (Last, First, Middle Initial) Jon P Gruenstern			Date of Receipt
	Mailing Address 2155 Hickory Court			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Oshkosh	State WI	Zip Code 54901-2581	Transaction ID: 20090804-1183-10-0
	FEC ID number of contributing federal political committee.	C	34901-2301	Amount of Each Receipt this Period 42.00
	Name of Employer Self-Employed	Occupation General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 882.00	
	SUBTOTAL of Receipts This Page (optional) .	1		172.00
	TOTAL This Period (last page this line numbe		<u> </u>	

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 172 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any pers g the name and address of any political committee to	
The Northwestern Mutual Life Insu	rance Company Federal PAC	
Full Name (Last, First, Middle Initial) Jon P Gruenstern		Date of Receipt
Mailing Address 2155 Hickory Cour		08 15 2009
City	State Zip Code	Transaction ID: 20090819-8-14-0
Oshkosh	WI 54901-2581	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	882.00	
Full Name (Last, First, Middle Initial) Jon P Gruenstern	'	Date of Receipt
Mailing Address 2155 Hickory Cour	t	08 31 2009
City	State Zip Code	Transaction ID: 20090902-8-14-46
Oshkosh	WI 54901-2581	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 882.00	
Full Name (Last, First, Middle Initial) Jon P Gruenstern		Date of Receipt
Mailing Address 2155 Hickory Cour	t	09 15 2009
City	State Zip Code	Transaction ID: 20090921-8-16-16
Oshkosh	WI 54901-2581	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	882.00	
		126.00

TOTAL This Period (last page this line number only)

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 173 / 574 (check only one) X
	Any information copied from such Reports and or for commercial purposes, other than using th	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	/ Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Jon P Gruenstern			Date of Receipt
	Mailing Address 2155 Hickory Court			09 / 30 / 2009
	City <u>Oshkosh</u>	State WI	Zip Code 54901-2581	Transaction ID: 20091008103448-8 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 882.00	
– В.	Full Name (Last, First, Middle Initial) Jon P Gruenstern			Date of Receipt
	Mailing Address 2155 Hickory Court			10 15 2009
	City Oshkosh	State WI	Zip Code 54901-2581	Transaction ID: 2009102293957-8 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	34001 2301	42.00
	Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 882.00	
– C.	Full Name (Last, First, Middle Initial) Jon P Gruenstern			Date of Receipt
	Mailing Address 2155 Hickory Court			10 31 2009
	City Oshkosh	State WI	Zip Code 54901-2581	Transaction ID: 20091105152043-8
	FEC ID number of contributing federal political committee.	C	34901-2301	Amount of Each Receipt this Period 42.00
	Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 882.00	
	SUBTOTAL of Receipts This Page (optional) .	1		126.00
	TOTAL This Period (last page this line numbe		<u> </u>	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 174 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
\ \	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insuran	ce Company	/ Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Jon P Gruenstern			Date of Receipt
	Mailing Address 2155 Hickory Court			11 1 15 2009
	City	State	Zip Code	Transaction ID: 20091118163132-8
	Oshkosh	WI	54901-2581	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	882.00	
- В.	Full Name (Last, First, Middle Initial) Thomas C. Guay			Date of Receipt
	Mailing Address W73 N377 Mulberry A	07 15 2009		
	City	State	Zip Code	Transaction ID: 20090720-666-13-0
	<u>Cedarburg</u>	WI	53012	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		54.00
	Name of Employer NML	Occupation VP-New	n Business	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		1170.00	
- С.	Full Name (Last, First, Middle Initial) Thomas C. Guay			Date of Receipt
	Mailing Address W73 N377 Mulberry A	venue		07 31 YYYYY 2009
	City	State	Zip Code	Transaction ID: 20090804-665-10-0
	<u>Cedarburg</u>	WI	53012	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		54.00
	Name of Employer NML	Occupation VP-New	n Business	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	1170.00	
ſ	SUPTOTAL of Descripts This Description -1)			150.00
-	SUBTOTAL of Receipts This Page (optional)		<u> </u>	
- 1	TOTAL This Period (last page this line number	only)		

	MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a
Any ii or for	nformation copied from such Reports and commercial purposes, other than using the	Statements mane name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	AME OF COMMITTEE (In Full) he Northwestern Mutual Life Insurar			
	ull Name (Last, First, Middle Initial) homas C. Guay			Date of Receipt
M	ailing Address W73 N377 Mulberry	08 / 15 / Y Y Y Y Y Y Y		
Ci <u>C</u>	ity edarburg	State WI	Zip Code 53012	Transaction ID: 20090819-732-14-15 Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		54.00
Na N	ame of Employer ML	Occupatio VP-New	n Business	
Re	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1170.00	
3. <u>Th</u>	ull Name (Last, First, Middle Initial) homas C. Guay			Date of Receipt
_	Mailing Address W73 N377 Mulberry Avenue			08 / 031 / 2009
Ci	ity edarburg	State WI	Zip Code 53012	Transaction ID: 20090902-732-15-1 Amount of Each Receipt this Period
FE	EC ID number of contributing deral political committee.	C	33012	54.00
Na N	ame of Employer ML	Occupatio VP-New	n Business	
Re	eceipt For: Primary General Other (specify)	- '	e Year-to-Date ▼ 1170.00	
	ull Name (Last, First, Middle Initial)			Date of Receipt
	ailing Address W73 N377 Mulberry	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	ity edarburg	State WI	Zip Code 53012	Transaction ID: 20090921-728-17-1 Amount of Each Receipt this Period
FE	EC ID number of contributing deral political committee.	C	00012	54.00
Na N	ame of Employer ML	Occupatio VP-New	n Business	
Re	eceipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1170.00	
SUE	BTOTAL of Receipts This Page (optional)			162.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 176 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	nce Company	/ Federal PAC	
ا A .	Full Name (Last, First, Middle Initial) Thomas C. Guay			Date of Receipt
	Mailing Address W73 N377 Mulberry	09 30 2009		
	City <u>Cedarburg</u>	State WI	Zip Code 53012	Transaction ID: 20091008104013-655 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		54.00
	Name of Employer NML	Occupation VP-New	on Business	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1170.00	
В.	Full Name (Last, First, Middle Initial) Thomas C. Guay	1		Date of Receipt
	Mailing Address W73 N377 Mulberry Avenue			10 15 2009
	City Cedarburg	State WI	Zip Code 53012	Transaction ID: 20091015164625-654 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00012	54.00
	Name of Employer NML	Occupation VP-New	n Business	
	Receipt For:	- '	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1170.00	
с. С.	Full Name (Last, First, Middle Initial) Thomas C. Guay			Date of Receipt
	Mailing Address W73 N377 Mulberry	Avenue		10 31 2009
	City	State	Zip Code	Transaction ID: 20091105152628-654
	Cedarburg FEC ID number of contributing federal political committee.	C	53012	Amount of Each Receipt this Period 54.00
	Name of Employer NML	Occupation VP-New	on Business	
	Receipt For: Primary General Other (specify) ▼	- '	e Year-to-Date ▼ 1170.00	
	SUBTOTAL of Receipts This Page (optional)			162.00
	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	5X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 1/7/574 (check only one) X 11a
Any information copied from such Reports or for commercial purposes, other than using	and Statements may	not be sold or used by any person	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins			
Full Name (Last, First, Middle Initial) Thomas C. Guay			Date of Receipt
Mailing Address W73 N377 Mulbe	rry Avenue		1 1 1 5 2 0 0 9
City Cedarburg	State WI	Zip Code 53012	Transaction ID: 2009111816423-654 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		54.00
Name of Employer NML	Occupation VP-New I		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1170.00	
Full Name (Last, First, Middle Initial) Stephen T Guinan			Date of Receipt
Mailing Address 56 Country Knoll Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Binghamton	State NY	Zip Code 13901-6109	Transaction ID: 20090720-1230-13-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer Guinan Fncl Grp LLC	Occupation Special A		
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 882.00	
Full Name (Last, First, Middle Initial) Stephen T Guinan			Date of Receipt
Mailing Address 56 Country Knoll	Drive		07 31 2009
City Binghamton	State NY	Zip Code 13901-6109	Transaction ID: 20090804-1227-10-0
FEC ID number of contributing federal political committee.	C	13901-0109	Amount of Each Receipt this Period 42.00
Name of Employer Guinan Fncl Grp LLC	Occupation Special A		7
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 882.00	
SUBTOTAL of Receipts This Page (optio	nal)		138.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 178 / 574 (check only one) X 11a
4	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma ne name and ad	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insura			
۸.	Full Name (Last, First, Middle Initial) Stephen T Guinan			Date of Receipt
	Mailing Address 56 Country Knoll Driv			08 15 2009
	City <u>Binghamton</u>	State NY	Zip Code 13901-6109	Transaction ID: 20090819-52-14-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Guinan Fncl Grp LLC	Occupation Special A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 882.00	
_	Full Name (Last, First, Middle Initial) Stephen T Guinan	-		Date of Receipt
	Mailing Address 56 Country Knoll Driv	08 31 2009		
	City	State	Zip Code	Transaction ID: 20090902-52-14-46
	Binghamton	NY	13901-6109	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Guinan Fncl Grp LLC	Occupation Special A		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	882.00	
_	Full Name (Last, First, Middle Initial) Stephen T Guinan			Date of Receipt
	Mailing Address 56 Country Knoll Driv	ve		09 15 2009
	City Binghamton	State NY	Zip Code 13901-6109	Transaction ID: 20090921-53-16-16 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10001 0100	42.00
	Name of Employer Guinan Fnol Grp LLC	Occupation Special /		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 882.00	
	SUBTOTAL of Receipts This Page (optional)	1		126.00

SCHEDULE A (FEC Form	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 179 / 574 (check only one) X
or for commercial purposes, other than NAME OF COMMITTEE (In Full)	rts and Statements may not be sold or used by any persousing the name and address of any political committee to nsurance Company Federal PAC	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Stephen T Guinan		Date of Receipt
Mailing Address 126 Waverly C		09 / 09 / 2009
City <u>Phoenixville</u>	State Zip Code PA 19460-2500	Transaction ID: 20091008103448-53 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer Guinan Fncl Grp LLC	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 882.00	
Full Name (Last, First, Middle Initial) Stephen T Guinan		Date of Receipt
Mailing Address 126 Waverly C	ircle	10 15 2009
City	State Zip Code	Transaction ID: 2009102293957-53
Phoenixville FEC ID number of contributing federal political committee.	PA 19460-2500	Amount of Each Receipt this Period 42.00
Name of Employer Guinan Fncl Grp LLC	Occupation Special Agent	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Stephen T Guinan		Date of Receipt
Mailing Address 126 Waverly C	ircle	M M / D D / Y Y Y Y Y 1 1 1 1 1 1 1 1 1 1 1 1 1 1
City Phoenixville	State Zip Code PA 19460-2500	Transaction ID: 20091105152043-53
FEC ID number of contributing federal political committee.	PA 19460-2500	Amount of Each Receipt this Period 42.00
Name of Employer Guinan Fncl Grp LLC	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 882.00	
SURTOTAL of Receipts This Page (or	otional)	126.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 180 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insuran	ce Company	Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Stephen T Guinan			Date of Receipt
	Mailing Address 126 Waverly Circle City	State	Zip Code	11 15 20001111163133 53
	Phoenixville	PA	21p Code 19460-2500	Transaction ID: 20091118163132-53 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Guinan Fncl Grp LLC	Occupatio Special A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 882.00	
- В.	Full Name (Last, First, Middle Initial) Kevin J Hassan	I		Date of Receipt
	Mailing Address 804 Montparnasse Pla	ice		07 15 2009
	City	State	Zip Code	Transaction ID: 20090720-1205-13-1
	Newtown Sq	PA	19073-2623	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		125.00
	Name of Employer Hassan Group LLC	Occupatio Special A		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		2625.00	
с. С.	Full Name (Last, First, Middle Initial) Kevin J Hassan	1		Date of Receipt
	Mailing Address 804 Montparnasse Pla	ice		07 31 2009
	City	State	Zip Code	Transaction ID: 20090804-1203-10-0
	Newtown Sq	PA	19073-2623	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer Hassan Group LLC	Occupatio Special A		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		2625.00	
	SUBTOTAL of Receipts This Page (optional)		\	292.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 181 / 574 (check only one) X
	id Statements may not be sold or used by any perso the name and address of any political committee to	
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	ance Company Federal PAC	
Full Name (Last, First, Middle Initial) Kevin J Hassan		Date of Receipt
Mailing Address 804 Montparnasse		08 / 15 / 2009
City	State Zip Code	Transaction ID: 20090819-28-14-0
Newtown Sq	PA 19073-2623	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Hassan Group LLC	Occupation Special Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2625.00	
Full Name (Last, First, Middle Initial) Kevin J Hassan		Date of Receipt
Mailing Address 804 Montparnasse	Place	08 31 2009
City	State Zip Code	Transaction ID: 20090902-28-14-46
Newtown Sq	PA 19073-2623	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Hassan Group LLC	Occupation Special Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2625.00	
Full Name (Last, First, Middle Initial) Kevin J Hassan		Date of Receipt
Mailing Address 804 Montparnasse	Place	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20090921-28-16-16
Newtown Sq	PA 19073-2623	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Hassan Group LLC	Occupation Special Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2625.00	
	1	375.00

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 182 / 574 (check only one) X 11a
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and address of any political committee	to solicit contributions from such committee.
∠ A.	Full Name (Last, First, Middle Initial) Kevin J Hassan Mailing Address 804 Montparnasse Pla	ace	Date of Receipt
	City Newtown Sq	State Zip Code PA 19073-2623	0 9 3 0 2 0 0 9 Transaction ID: 20091008103448-28 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	125.00
	Name of Employer Hassan Group LLC Receipt For: Primary General Other (specify) ▼	Occupation Special Agent Aggregate Year-to-Date 2625.00	
- В.	Full Name (Last, First, Middle Initial) Kevin J Hassan Mailing Address 804 Montparnasse Pla	ace	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 2009102293957-28
	Newtown Sq FEC ID number of contributing federal political committee.	PA 19073-2623	Amount of Each Receipt this Period 125.00
	Name of Employer Hassan Group LLC	Occupation Special Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 2625.00	
_).	Full Name (Last, First, Middle Initial) Kevin J Hassan		Date of Receipt
	Mailing Address 804 Montparnasse Pla	ace	10 31 2009
	City Newtown Sq	State Zip Code PA 19073-2623	Transaction ID: 20091105152043-28
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 125.00
	Name of Employer Hassan Group LLC	Occupation Special Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2625.00	
	SUBTOTAL of Receipts This Page (optional)		375.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 183 / 574 (check only one) X
or for commercial purposes, other than u	ts and Statements may not be sold or used by any perso sing the name and address of any political committee to nsurance Company Federal PAC	n for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)		
Kevin J Hassan Mailing Address 804 Montparnas	sse Place	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City Newtown Sq	State Zip Code PA 19073-2623	Transaction ID: 20091118163132-28 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Hassan Group LLC	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2625.00	
Full Name (Last, First, Middle Initial) Laura J. Hauschild		Date of Receipt
Mailing Address 14611 50th Roa	ad	10 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20091015164625-77
Sturtevant	WI 53177-1038	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	13.00
Name of Employer NML	Occupation Dir Retirement Mkt Prj	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 237.00	
Full Name (Last, First, Middle Initial) Laura J. Hauschild		Date of Receipt
Mailing Address 14611 50th Roa	ad	10 31 2009
City	State Zip Code	Transaction ID: 20091105152628-77
Sturtevant FEC ID number of contributing federal political committee.	WI 53177-1038	Amount of Each Receipt this Period 13.00
Name of Employer NML	Occupation Dir Retirement Mkt Prj	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 237.00	
SUBTOTAL of Receipts This Page (op/	tional)	151.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 184 / 574 (check only one) X
	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ce Company	/ Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Laura J. Hauschild			Date of Receipt
	Mailing Address 14611 50th Road			11 1 15 2009
	City Sturtevant	State WI	Zip Code 53177-1038	Transaction ID: 2009111816423-771 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		13.00
	Name of Employer NML	Occupatio Dir Retire	ement Mkt Prj	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 237.00	
– В.	Full Name (Last, First, Middle Initial) Wayne F. Heidenreich, MD			Date of Receipt
	Mailing Address 4753 N Larkin Street			08 31 2009
	City	State WI	Zip Code	Transaction ID: 20090902-1116-15-1
	Whitefish Bay FEC ID number of contributing federal political committee.	C	53211-1152	Amount of Each Receipt this Period
	Name of Employer NML	Occupatio Medical		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 285.00	
_ С.	Full Name (Last, First, Middle Initial) Wayne F. Heidenreich, MD			Date of Receipt
	Mailing Address 4753 N Larkin Street			0 9 1 5 / Y Y Y Y Y Y
	City Whitefish Bay	State WI	Zip Code 53211-1152	Transaction ID: 20090921-1107-17-1
	FEC ID number of contributing federal political committee.	C	33211-1132	Amount of Each Receipt this Period 15.00
	Name of Employer NML	Occupatio Medical		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 285.00	
	SUBTOTAL of Receipts This Page (optional)	1		43.00
	TOTAL This Period (last page this line number			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 185 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and 3 or for commercial purposes, other than using the	Statements ma e name and ad	by not be sold or used by any pers dress of any political committee t	con for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ice Company	y Federal PAC	
A.	Full Name (Last, First, Middle Initial) Wayne F. Heidenreich, MD			Date of Receipt
	Mailing Address 4753 N Larkin Street			09 / 000 / 2009
	City Whitefish Bay	State WI	Zip Code 53211-1152	Transaction ID: 20091008104013-1034 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		15.00
	Name of Employer NML	Occupation Medical		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 285.00	
В.	Full Name (Last, First, Middle Initial) Wayne F. Heidenreich, MD Mailing Address 4753 N Larkin Street	<u> </u>		Date of Receipt
			7: 0.1	10 15 2009
	City Whitefish Bay	State WI	Zip Code 53211-1152	Transaction ID: 20091015164625-1033 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer NML	Occupation Medical		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		285.00	
C.	Full Name (Last, First, Middle Initial) Wayne F. Heidenreich, MD			Date of Receipt
	Mailing Address 4753 N Larkin Street			10 31 YYYYY 2009
	City Whitefish Bay	State WI	Zip Code 53211-1152	Transaction ID: 20091105152628-1033
	FEC ID number of contributing federal political committee.	C	33211-1132	Amount of Each Receipt this Period 15.00
	Name of Employer NML	Occupation Medical		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 285.00	
	SUBTOTAL of Receipts This Page (optional) .	1		45.00
	TOTAL This Period (last page this line number	r only)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 186 / 574 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	d Statements may not be sold or used by any person the name and address of any political committee to ance Company Federal PAC	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Wayne F. Heidenreich, MD Mailing Address 4753 N Larkin Stree	et .	Date of Receipt 1 1 1 5 2 0 0 9
City Whitefish Bay FEC ID number of contributing federal political committee.	State Zip Code WI 53211-1152	Transaction ID: 2009111816423-1032 Amount of Each Receipt this Period 15.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation Medical Dir/HR Aggregate Year-to-Date 285.00	
Full Name (Last, First, Middle Initial) Mark J Heurung Mailing Address 18443 Melissa Circl	e	Date of Receipt 0 7 1 5 2 0 0 9
City Eden Prairie FEC ID number of contributing federal political committee.	State Zip Code MN 55347-1058	Transaction ID: 20090720-1229-13-1 Amount of Each Receipt this Period 75.00
Name of Employer NML Receipt For: Primary Other (specify) ▼	Occupation Special Agent Aggregate Year-to-Date ▼	1
Full Name (Last, First, Middle Initial) Mark J Heurung Mailing Address 18443 Melissa Circl	e	Date of Receipt
City Eden Prairie FEC ID number of contributing federal political committee.	State Zip Code MN 55347-1058	Transaction ID: 20090804-1226-10-0 Amount of Each Receipt this Period 75.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation Special Agent Aggregate Year-to-Date ▼ 2240.00	
SUBTOTAL of Receipts This Page (optional)	165.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 187/574 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur		•	
Full Name (Last, First, Middle Initial) Mark J Heurung			Date of Receipt
Mailing Address 18443 Melissa Circ	le		08 15 2009
City Eden Prairie	State MN	Zip Code 55347-1058	Transaction ID: 20090819-51-14-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		75.00
Name of Employer NML	Occupation Special A		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2240.00	
Full Name (Last, First, Middle Initial) Mark J Heurung			Date of Receipt
Mailing Address 18443 Melissa Circ	le		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Eden Prairie	State MN	Zip Code 55347-1058	Transaction ID: 20090902-51-14-46 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		75.00
Name of Employer NML	Occupation Special A		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 2240.00	
Full Name (Last, First, Middle Initial) Mark J Heurung			Date of Receipt
Mailing Address 18443 Melissa Circ	le		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Eden Prairie	State MN	Zip Code 55347-1058	Transaction ID: 20090921-52-16-16
FEC ID number of contributing federal political committee.	C	33347-1036	Amount of Each Receipt this Period 208.00
Name of Employer NML	Occupation Special A		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 2240.00	
SUBTOTAL of Receipts This Page (optiona	1)		358.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 188 / 574 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	d Statements may not be sold or used by any per the name and address of any political committee ance Company Federal PAC	rson for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mark J Heurung Mailing Address 18443 Melissa Circl	e	Date of Receipt
City Eden Prairie FEC ID number of contributing	State Zip Code MN 55347-1058	0 9 3 0 2 0 0 9 Transaction ID: 20091008103448-52 Amount of Each Receipt this Period 208.00
Receipt For: Primary Other (specify)	Occupation Special Agent Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Mark J Heurung Mailing Address 18443 Melissa Circl	e	Date of Receipt 1 0 1 5 2 0 0 9
City Eden Prairie FEC ID number of contributing	State Zip Code MN 55347-1058	Transaction ID: 2009102293957-52 Amount of Each Receipt this Period
Receipt For: Primary Other (specify)	Occupation Special Agent Aggregate Year-to-Date ▼	208.00
Full Name (Last, First, Middle Initial) Mark J Heurung Mailing Address 18443 Melissa Circl	e	Date of Receipt
City Eden Prairie FEC ID number of contributing federal political committee.	State Zip Code MN 55347-1058	1 0 3 1 2 0 0 9 Transaction ID: 20091105152043-52 Amount of Each Receipt this Period 208.00
Name of Employer NML	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2240.00	
SUBTOTAL of Receipts This Page (optional)	624.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for each	parate schedule(s) category of the Summary Page	FOR LINE NUMBER: PAGE 189 / 574 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insural	e name and address of any	political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mark J Heurung Mailing Address 18443 Melissa Circle City Eden Prairie FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Co	ode 7-1058	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Gary M. Hewitt Mailing Address 2045 Elm Tree Road City Elm Grove FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Co WI 53122 C Occupation VP Treas & Inv Op Aggregate Year-to-Da	2-1117 0S	Date of Receipt M M M / D D / Y Y Y Y Y 1 5 2 0 0 9 Transaction ID: 20090720-937-13-0 Amount of Each Receipt this Period 70.00
Full Name (Last, First, Middle Initial) Gary M. Hewitt Mailing Address 2045 Elm Tree Road City Elm Grove FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Co WI 53122 C Occupation VP Treas & Inv Op Aggregate Year-to-Da	2-1117 0S	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)			348.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 190 / 574 (check only one) X 11a
Ar	y information copied from such Reports and for commercial purposes, other than using th NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insural	e name and addre	ss of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
<u>∠</u> \ .	Full Name (Last, First, Middle Initial) Gary M. Hewitt Mailing Address 2045 Elm Tree Road			Date of Receipt
	City Elm Grove	State WI	Zip Code 53122-1117	0 8 1 5 2 0 0 9 Transaction ID: 20090819-1002-14-15 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		70.00
	Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation VP Treas & Aggregate Ye	Inv Ops ear-to-Date ▼ 1578.00	
 B.	Full Name (Last, First, Middle Initial) Gary M. Hewitt Mailing Address 2045 Elm Tree Road			Date of Receipt 0 8 3 1 2 0 0 9
	City Elm Grove	State WI	Zip Code 53122-1117	Transaction ID: 20090902-1002-15-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		70.00
	Name of Employer NML	Occupation VP Treas &	Inv Ops	
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 1578.00	
_	Full Name (Last, First, Middle Initial) Gary M. Hewitt			Date of Receipt
	Mailing Address 2045 Elm Tree Road City	State	Zip Code	09 15 2009
	Elm Grove	WI	53122-1117	Transaction ID: 20090921-996-17-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		70.00
	Name of Employer NML	Occupation VP Treas &	· · · · · · · · · · · · · · · · · · ·	
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 1578.00	
s	UBTOTAL of Receipts This Page (optional)			210.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 191 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	ice Company	/ Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Gary M. Hewitt			Date of Receipt
	Mailing Address 2045 Elm Tree Road			09 30 4 2009
	City <u>Elm Grove</u>	State WI	Zip Code 53122-1117	Transaction ID: 20091008104013-923 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		70.00
	Name of Employer NML	Occupation VP Treas	n s & Inv Ops	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1578.00	
- В.	Full Name (Last, First, Middle Initial) Gary M. Hewitt			Date of Receipt
	Mailing Address 2045 Elm Tree Road			10 15 7 2009
	City Elm Grove	State WI	Zip Code 53122-1117	Transaction ID: 20091015164625-922 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		70.00
	Name of Employer NML	Occupation VP Treas	s & Inv Ops	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1578.00	
с. С.	Full Name (Last, First, Middle Initial) Gary M. Hewitt			Date of Receipt
	Mailing Address 2045 Elm Tree Road			10 31 YYYY 2009
	City Elm Grove	State WI	Zip Code 53122-1117	Transaction ID: 20091105152628-922 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		70.00
	Name of Employer NML	Occupation VP Treas	s & Inv Ops	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1578.00	
	SUBTOTAL of Receipts This Page (optional) .			210.00
Ī	TOTAL This Period (last page this line number	r only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 192/5/4 (check only one)
Any information copied from such Reports are or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	rance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Gary M. Hewitt			Date of Receipt
Mailing Address 2045 Elm Tree Roa	ad		11 15 2009
City Elm Grove	State WI	Zip Code 53122-1117	Transaction ID: 2009111816423-922 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		70.00
Name of Employer NML	Occupation VP Treas	n s & Inv Ops	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1578.00	
Full Name (Last, First, Middle Initial) Patricia J. Hillmann	I		Date of Receipt
Mailing Address 1227 N 55th Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Milwaukee</u>	State WI	Zip Code 53208-2519	Transaction ID: 2009111816423-634 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		10.00
Name of Employer NML	Occupation Dir Ann (
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) Michael T. Holloway			Date of Receipt
Mailing Address 425 Lake Bluff Lane	е		07 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Grafton	State WI	Zip Code	Transaction ID: 20090720-900-13-0
FEC ID number of contributing federal political committee.	C	53024-9764	Amount of Each Receipt this Period 24.00
Name of Employer NML	Occupation Director	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 396.00	
SUBTOTAL of Receipts This Page (optional	- I		104.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 193 / 574 (check only one) X
7	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Z	Full Name (Last, First, Middle Initial)		1 000141 710	
۸.	Michael T. Holloway Mailing Address 425 Lake Bluff Lane			Date of Receipt 0 7 3 1 2 0 0 9
	City	State	Zip Code	Transaction ID: 20090804-898-10-0
	Grafton	WI	53024-9764	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		24.00
	Name of Employer NML	Occupation Director	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 396.00	
_ 3.	Full Name (Last, First, Middle Initial) Michael T. Holloway Mailing Address 425 Lake Bluff Lane			Date of Receipt
	Mailing Address 425 Lake Bluff Lane			08 / 15 / 2009
	City	State	Zip Code	Transaction ID: 20090819-965-14-15
	Grafton	WI	53024-9764	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		24.00
	Name of Employer NML	Occupation Director		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 396.00	
	Full Name (Last, First, Middle Initial) Michael T. Holloway Mailing Address 425 Lake Bluff Lane	I		Date of Receipt
				08 31 2009
	City Grafton	State WI	Zip Code 53024-9764	Transaction ID: 20090902-965-15-1
	FEC ID number of contributing federal political committee.	C	33024-9764	Amount of Each Receipt this Period 24.00
	Name of Employer NML	Occupation Director	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 396.00	
	SUBTOTAL of Receipts This Page (optional) .			72.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 194 / 574 (check only one) X
_	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insurar	ice Company	/ Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Michael T. Holloway			Date of Receipt
	Mailing Address 425 Lake Bluff Lane City	State	Zip Code	0 9 1 5 2 0 0 9 Transaction ID: 20090921-960-17-1
	Grafton	WI	53024-9764	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		24.00
	Name of Employer NML	Occupation Director	on	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 396.00	
- В.	Full Name (Last, First, Middle Initial) Michael T. Holloway			Date of Receipt
	Mailing Address 425 Lake Bluff Lane	09 30 2009		
	City	State	Zip Code	Transaction ID: 20091008104013-887
	Grafton	WI	53024-9764	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		24.00
	Name of Employer NML	Occupation Director	on	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 396.00	
- C.	Full Name (Last, First, Middle Initial) Michael T. Holloway			Date of Receipt
О.	Mailing Address 425 Lake Bluff Lane			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20091015164625-886
	Grafton	WI	53024-9764	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		24.00
	Name of Employer NML	Occupation Director		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 396.00	
	SUBTOTAL of Receipts This Page (optional) .			72.00
f	TOTAL This Period (last page this line number	r only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 195 / 574 (check only one) X
(Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insurar	nce Company	Federal PAC	
۸.	Full Name (Last, First, Middle Initial) Michael T. Holloway			Date of Receipt
	Mailing Address 425 Lake Bluff Lane			10 31 2009
	City Grafton	State WI	Zip Code 53024-9764	Transaction ID: 20091105152628-886
	FEC ID number of contributing federal political committee.	C	55024-9764	Amount of Each Receipt this Period 24.00
	Name of Employer NML	Occupatio Director	n	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 396.00	
- 3.	Full Name (Last, First, Middle Initial) Michael T. Holloway Mailing Address 425 Lake Bluff Lane			Date of Receipt
	City State		7in Onda	11 15 2009
	Grafton	WI	Zip Code 53024-9764	Transaction ID: 2009111816423-886 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		24.00
	Name of Employer NML	Occupatio Director	n	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 396.00	
- :.	Full Name (Last, First, Middle Initial) Steve H Holter Mailing Address 11390 N Creekside C	ourt		Date of Receipt
	City	State	Zip Code	0 7 1 5 2 0 0 9 Transaction ID: 20090720-1235-13-1
	Mequon FEC ID number of contributing federal political committee.	C	53092-4377	Amount of Each Receipt this Period 42.00
	Name of Employer The Holter Agency Inc	Occupatio Special A		
	Receipt For: Primary General Other (specify) ▼	- ' '	e Year-to-Date ▼ 1297.00	
ſ	SUBTOTAL of Receipts This Page (optional)	1		90.00

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 196 / 574 (check only one) X 11a
Any infor or for cor	mation copied from such Reports and S nmercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	E OF COMMITTEE (In Full) Northwestern Mutual Life Insuran	ce Company	Federal PAC	
	lame (Last, First, Middle Initial) H Holter			Date of Receipt
Mailin	g Address 11390 N Creekside Co	ourt		07 31 YYYYY
City Megi	uon	State WI	Zip Code 53092-4377	Transaction ID: 20090804-1232-10-0 Amount of Each Receipt this Period
FEC I	D number of contributing al political committee.	С		42.00
Name The H	e of Employer Holter Agency Inc	Occupation Special A		
	pt For: Primary General Other (specify) ▼	, ' ' ' 	e Year-to-Date ▼ 1297.00	
B. Steve	lame (Last, First, Middle Initial) H Holter	I		Date of Receipt
	Mailing Address 11390 N Creekside Court			08 / 15 / Y Y Y Y Y
City	City State Mequon WI		Zip Code	Transaction ID: 20090819-57-14-0
FEC I	D number of contributing al political committee.	C	53092-4377	Amount of Each Receipt this Period 42.00
Name The H	e of Employer Holter Agency Inc	Occupation Special /		
	pt For: Primary General Other (specify) ▼	, ' ' ' 	e Year-to-Date ▼ 1297.00	
	ame (Last, First, Middle Initial) H Holter			Date of Receipt
	g Address 11390 N Creekside Co	ourt		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Megi	uon	State WI	Zip Code 53092-4377	Transaction ID: 20090902-57-14-46 Amount of Each Receipt this Period
FEC I	D number of contributing al political committee.	C		42.00
Name The F	e of Employer Holter Agency Inc	Occupation Special /		
	pt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1297.00	
SUBTO	TAL of Receipts This Page (optional)			126.00
	This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 197 / 574 (check only one) X 11a 11b 11c 12
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	ance Company Federal PAC	
Full Name (Last, First, Middle Initial) Steve H Holter		Date of Receipt
Mailing Address 11390 N Creekside		09 / 15 / Y Y Y Y Y Y
City	State Zip Code WI 53092-4377	Transaction ID: 20090921-60-16-16
Mequon FEC ID number of contributing federal political committee.	WI 53092-4377	Amount of Each Receipt this Period 125.00
Name of Employer The Holter Agency Inc	Occupation Special Agent	7
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1297.00	
Full Name (Last, First, Middle Initial) Steve H Holter		Date of Receipt
Mailing Address 11390 N Creekside	09 30 7 9 9	
City	State Zip Code	Transaction ID: 20091008103448-6
Mequon	WI 53092-4377	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer The Holter Agency Inc	Occupation Special Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1297.00	
Full Name (Last, First, Middle Initial) Steve H Holter		Date of Receipt
Mailing Address 11390 N Creekside	Court	10 15 2009
City	State Zip Code	Transaction ID: 2009102293957-60
Mequon	WI 53092-4377	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer The Holter Agency Inc	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1297.00	
SURTOTAL of Receipts This Page (ontions	l)	375.00

SCHEDULE A (FEC	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 198/5/4 (check only one)			
Any information copied from so or for commercial purposes, or	uch Reports and Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
NAME OF COMMITTEE (I		• •				
Full Name (Last, First, Mide Steve H Holter	dle Initial)		Date of Receipt			
City <u>Mequon</u>	State WI	Zip Code 53092-4377	Transaction ID: 20091105152043-60 Amount of Each Receipt this Period			
FEC ID number of contribution federal political committee.	ting		125.00			
Name of Employer The Holter Agency Inc	Occupation Special A					
Receipt For: Primary Ge Other (specify) ▼	Aggregate	Year-to-Date ▼ 1297.00				
Full Name (Last, First, Mide Steve H Holter	dle Initial)		Date of Receipt			
Mailing Address 11390	Mailing Address 11390 N Creekside Court City State Zip Code					
City Meguon			Transaction ID: 20091118163132-60 Amount of Each Receipt this Period			
FEC ID number of contributed federal political committee.		53092-4377	125.00			
Name of Employer The Holter Agency Inc	Occupation Special A					
Receipt For: Primary Ge Other (specify) ▼		e Year-to-Date ▼ 1297.00				
Full Name (Last, First, Mide Harry P Hoopis	dle Initial)		Date of Receipt			
	Imtree Road		07 15 2009			
City Lake Forest	State IL	Zip Code 60045-1413	Transaction ID: 20090720-1178-13- Amount of Each Receipt this Period			
FEC ID number of contributed federal political committee.		00045-1415	208.00			
Name of Employer Self-Employed	Occupatio General	n Insurance Agent				
Receipt For: Primary Ge Other (specify) ▼		e Year-to-Date ▼ 4368.00				
SUBTOTAL of Receipts This	Page (optional)		458.00			

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 199 / 574 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	d Statements may not be sold or used by any perso the name and address of any political committee to ance Company Federal PAC	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Harry P Hoopis Mailing Address 1133 Elmtree Road		Date of Receipt 0 7 0 3 1 2 0 0 9
City <u>Lake Forest</u> FEC ID number of contributing	State Zip Code IL 60045-1413 C	0 7 3 1 2 0 0 9 Transaction ID: 20090804-1176-10-0 Amount of Each Receipt this Period 208.00
Receipt For: Primary Other (specify)	Occupation General Insurance Agent Aggregate Year-to-Date 4368.00	
Full Name (Last, First, Middle Initial) Harry P Hoopis Mailing Address 1133 Elmtree Road		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Lake Forest FEC ID number of contributing federal political committee.	State Zip Code IL 60045-1413 C	Transaction ID: 20090819-1-14-0 Amount of Each Receipt this Period 208.00
Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼	Occupation General Insurance Agent Aggregate Year-to-Date 4368.00	
Full Name (Last, First, Middle Initial) Harry P Hoopis Mailing Address 1133 Elmtree Road		Date of Receipt
City <u>Lake Forest</u> FEC ID number of contributing federal political committee.	State Zip Code IL 60045-1413 C	0 8 3 1 2 0 0 9 Transaction ID: 20090902-1-14-46 Amount of Each Receipt this Period 208.00
Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼	Occupation General Insurance Agent Aggregate Year-to-Date ▼ 4368.00	
SUBTOTAL of Receipts This Page (optional)	624.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 200 / 574 (check only one) X	
4	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ce Company	/ Federal PAC		
Α.	Full Name (Last, First, Middle Initial) Harry P Hoopis			Date of Receipt	
	Mailing Address 1133 Elmtree Road			09 / 15 / 2009	
	City Lake Forest	State IL	Zip Code 60045-1413	Transaction ID: 20090921-1-16-16 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		208.00	
	Name of Employer Self-Employed	Occupatio General	n Insurance Agent		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4368.00		
_ В.	Full Name (Last, First, Middle Initial) Harry P Hoopis	<u> </u>		Date of Receipt	
	Mailing Address 1133 Elmtree Road			09 30 2009	
	City	State IL	Zip Code	Transaction ID: 20091008103448-1	
	Lake Forest FEC ID number of contributing federal political committee.	C	60045-1413	Amount of Each Receipt this Period 208.00	
	Name of Employer Self-Employed	Occupatio General	n Insurance Agent		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4368.00		
с. С.	Full Name (Last, First, Middle Initial) Harry P Hoopis			Date of Receipt	
	Mailing Address 1133 Elmtree Road			10 15 2009	
	City	State IL	Zip Code	Transaction ID: 2009102293957-1	
	Lake Forest FEC ID number of contributing federal political committee.	C	60045-1413	Amount of Each Receipt this Period 208.00	
	Name of Employer Self-Employed	Occupatio General	n Insurance Agent		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4368.00		
	SUBTOTAL of Receipts This Page (optional) .	1		624.00	
上	TOTAL This Period (last page this line number		<u> </u>		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 201 / 574 (check only one)		
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may g the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	<u> </u>				
Full Name (Last, First, Middle Initial) Harry P Hoopis			Date of Receipt		
City Lake Forest	State IL	Zip Code 60045-1413	Transaction ID: 20091105152043-1 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		208.00		
Name of Employer Self-Employed	Occupation General	n Insurance Agent			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4368.00			
Full Name (Last, First, Middle Initial) Harry P Hoopis			Date of Receipt		
Mailing Address 1133 Elmtree Road	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City Lake Forest	State IL	Zip Code 60045-1413	Transaction ID: 20091118163132-1 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	00045-1415	208.00		
Name of Employer Self-Employed	Occupation	n Insurance Agent			
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 4368.00			
Full Name (Last, First, Middle Initial) Brian J Hubbell			Date of Receipt		
Mailing Address 1701 E Westminst	er Lane		M M / D D / Y Y Y Y Y 1 Y 1 1 1 1 5 2 0 0 9		
City Spokane	State WA	Zip Code 99223-6712	Transaction ID: 20091118163132-17		
FEC ID number of contributing federal political committee.	C	39225-0712	Amount of Each Receipt this Period 50.00		
Name of Employer Hubbell Fncl Grp Inc	Occupation Special A				
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00			
SUBTOTAL of Receipts This Page (option	al)		466.00		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 202 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any personess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	nce Company	Federal PAC	
∠ A .	Full Name (Last, First, Middle Initial) Scott Iodice			Date of Receipt
	Mailing Address 5612 Enderly Road			07 15 2009
	City	State	Zip Code	Transaction ID: 20090720-1212-13-1
	Baltimore	<u>MD</u>	21212-2939	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer NML	Occupation General I	nsurance Agent	
	Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	2625.00	
– В.	Full Name (Last, First, Middle Initial) Scott Iodice			Date of Receipt
	Mailing Address 5612 Enderly Road	07 31 2009		
	City	State	Zip Code	Transaction ID: 20090804-1209-10-0
	Baltimore	<u>MD</u>	21212-2939	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer NML	Occupation General I	nsurance Agent	
	Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼		2625.00	
_ C.	Full Name (Last, First, Middle Initial) Scott Iodice			Date of Receipt
o .	Mailing Address 5612 Enderly Road			M M / D D / Y Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20090819-34-14-0
	Baltimore	MD	21212-2939	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer NML	Occupation General I	nsurance Agent	
	Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	2625.00	
ſ	SURTOTAL of Receipts This Page (antique)	1		375.00
	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		<u>.</u>	

SCHEDULE A (FEC FO ITEMIZED RECEIPTS	rm 3X) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 203 / 574 (check only one) X
or for commercial purposes, other th NAME OF COMMITTEE (In Full)	eports and Statements may not be sold or used by any perso an using the name and address of any political committee to) fe Insurance Company Federal PAC	n for the purpose of soliciting contributions
Full Name (Last, First, Middle Init Scott lodice Mailing Address 5612 Enderl	<u> </u>	Date of Receipt
City Baltimore	State Zip Code MD 21212-2939	Transaction ID: 20090902-34-14-46 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation General Insurance Agent Aggregate Year-to-Date 2625.00	
Full Name (Last, First, Middle Init Scott lodice Mailing Address 5612 Enderl	<u>'</u>	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20090921-34-16-16
<u>Baltimore</u>	MD 21212-2939	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer NML	Occupation General Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2625.00	
Full Name (Last, First, Middle Init	rial)	Date of Receipt
Mailing Address 5612 Enderl	y Road	09 30 2009
City	State Zip Code	Transaction ID: 20091008103448-34
Baltimore FEC ID number of contributing federal political committee.	MD 21212-2939	Amount of Each Receipt this Period 125.00
Name of Employer NML	Occupation General Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2625.00	
SUBTOTAL of Receipts This Page	(optional)	375.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 204 / 574 (check only one) X
, A	ny information copied from such Reports and r for commercial purposes, other than using the	Statements may ne name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	Federal PAC	
۸.	Full Name (Last, First, Middle Initial) Scott lodice			Date of Receipt
	Mailing Address 5612 Enderly Road City	State	Zip Code	10 15 2009
	Baltimore	MD	21212-2939	Transaction ID: 2009102293957-34 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		125.00
	Name of Employer NML	Occupation General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2625.00	
 3.	Full Name (Last, First, Middle Initial) Scott lodice			Date of Receipt
	Mailing Address 5612 Enderly Road			10 31 7 2009
	City	State	Zip Code	Transaction ID: 20091105152043-34
	Baltimore FEC ID number of contributing federal political committee.	C	21212-2939	Amount of Each Receipt this Period 125.00
	Name of Employer NML	Occupation General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2625.00	
<u> </u>	Full Name (Last, First, Middle Initial) Scott Iodice			Date of Receipt
	Mailing Address 5612 Enderly Road			11 15 / 2009
	City	State MD	Zip Code	Transaction ID: 20091118163132-34
	Baltimore FEC ID number of contributing federal political committee.	C	21212-2939	Amount of Each Receipt this Period 125.00
	Name of Employer NML	Occupation General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	_, ,	e Year-to-Date ▼ 2625.00	
	SUBTOTAL of Receipts This Page (optional)	1		375.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 205 / 574 (check only one) X
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	/ Federal PAC	
∠ A .	Full Name (Last, First, Middle Initial) Nicholas E. Jahnke			Date of Receipt
	Mailing Address 23702 Champe Ford	Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Middleburg	State VA	Zip Code 20117-2940	Transaction ID: 20090720-969-13-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	2017 2040	76.00
	Name of Employer NML	Occupation Director-	on Field Production	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1596.00	
Б.	Full Name (Last, First, Middle Initial) Nicholas E. Jahnke Mailing Address 23702 Champe Ford	Pood		Date of Receipt
	<u> </u>			07 31 2009
	City Middleburg	State VA	Zip Code 20117-2940	Transaction ID: 20090804-967-10-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	2011/2040	76.00
	Name of Employer NML	Occupation Director-	n Field Production	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1596.00	
с.	Full Name (Last, First, Middle Initial) Nicholas E. Jahnke			Date of Receipt
	Mailing Address 23702 Champe Ford	Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Middleburg	State VA	Zip Code 20117-2940	Transaction ID: 20090819-1034-14-15 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20117-23-0	76.00
	Name of Employer NML	Occupation Director-	n Field Production	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1596.00	
	SUBTOTAL of Receipts This Page (optional)	1		228.00
	TOTAL This Period (last page this line numbe		<u> </u>	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 206 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	and Statements may not be sold or used by any persong the name and address of any political committee to urance Company Federal PAC	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Nicholas E. Jahnke Mailing Address 23702 Champe Fo	ord Road	Date of Receipt
City <u>Middleburg</u>	State Zip Code VA 20117-2940	0 8 3 1 2 0 0 9 Transaction ID: 20090902-1034-15-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	76.00
Receipt For: Primary General Other (specify)	Director-Field Production Aggregate Year-to-Date ▼ 1596.00	
Full Name (Last, First, Middle Initial) Nicholas E. Jahnke Mailing Address 23702 Champe Fo	ord Road	Date of Receipt 0 9 1 5 2 0 0 9
City	State Zip Code	Transaction ID: 20090921-1027-17-1
Middleburg FEC ID number of contributing federal political committee.	VA 20117-2940	Amount of Each Receipt this Period 76.00
Name of Employer NML	Occupation Director-Field Production	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1596.00	
Full Name (Last, First, Middle Initial) Nicholas E. Jahnke		Date of Receipt
Mailing Address 23702 Champe Fo	ord Road	09 30 Y Y Y Y Y Y
City Middleburg	State Zip Code VA 20117-2940	Transaction ID: 20091008104013-954 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	76.00
Name of Employer NML	Occupation Director-Field Production	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1596.00	
SUBTOTAL of Receipts This Page (option	nal)	228.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 207 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for	commercial purposes, other than using the AME OF COMMITTEE (In Full)	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	he Northwestern Mutual Life Insurance	ce Company	Federal PAC	
	ıll Name (Last, First, Middle Initial) cholas E. Jahnke			Date of Receipt
M	ailing Address 23702 Champe Ford F	Road		10 15 2009
Ci		State	Zip Code	Transaction ID: 20091015164625-953
	liddleburg	VA	20117-2940	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		76.00
Na N	ame of Employer ML	Occupation Director-	n Field Production	
Re	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1596.00	
	ıll Name (Last, First, Middle Initial) cholas E. Jahnke			Date of Receipt
M	ailing Address 23702 Champe Ford F	10 31 2009		
Ci	ty	State	Zip Code	Transaction ID: 20091105152628-953
<u>M</u>	liddleburg	VA	20117-2940	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	С		76.00
Na N	ame of Employer ML	Occupation Director-	n Field Production	
Re	eceipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1596.00	
	ull Name (Last, First, Middle Initial) cholas E. Jahnke	<u> </u>		Date of Receipt
M	ailing Address 23702 Champe Ford F	Road		11 15 2009
Ci	ty	State	Zip Code	Transaction ID: 2009111816423-953
<u>M</u>	liddleburg	VA	20117-2940	Amount of Each Receipt this Period
fe	EC ID number of contributing deral political committee.	C		76.00
Na N	ame of Employer ML	Occupation Director-	n Field Production	
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1596.00	
SUB	TOTAL of Receipts This Page (optional)			228.00
	AL This Period (last page this line number			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 208 / 574 (check only one) X 11a
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma ne name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	nce Company	/ Federal PAC	
Δ A .	Full Name (Last, First, Middle Initial) Gregory G. Johnson			Date of Receipt
	Mailing Address 507 W Kenilworth Ci	rcle		08 15 2009
	City <u>Meguon</u>	State WI	Zip Code 53092-6199	Transaction ID: 20090819-1184-14-15 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		14.00
	Name of Employer NML	Occupation Asst Gc	on & Asst Sec	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 294.00	
Б.	Full Name (Last, First, Middle Initial) Gregory G. Johnson Mailing Address 507 W Kenilworth Cir	rcle		Date of Receipt
			Zin Code	08 31 2009
	City Meguon	State WI	Zip Code 53092-6199	Transaction ID: 20090902-1184-15-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		14.00
	Name of Employer NML	Occupation Asst Gc	& Asst Sec	
	Receipt For:	Aggregate	e Year-to-Date	
	Primary General Other (specify) ▼		294.00	
с. С.	Full Name (Last, First, Middle Initial) Gregory G. Johnson			Date of Receipt
	Mailing Address 507 W Kenilworth Ci	rcle		09 15 YYYY 2009
	City <u>Mequon</u>	State WI	Zip Code 53092-6199	Transaction ID: 20090921-1173-17-1
	FEC ID number of contributing federal political committee.	C	55092-0199	Amount of Each Receipt this Period 14.00
	Name of Employer NML	Occupation Asst Gc	on & Asst Sec	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 294.00	
	SUBTOTAL of Receipts This Page (optional)			42.00
	TOTAL This Period (last page this line number		<u> </u>	

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 209 / 574 (check only one) X
or fo	information copied from such Reports and S r commercial purposes, other than using the IAME OF COMMITTEE (In Full)	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
/ /	he Northwestern Mutual Life Insuranc	ce Company	/ Federal PAC	
A . <u>G</u>	ull Name (Last, First, Middle Initial) Gregory G. Johnson			Date of Receipt
N	Mailing Address 507 W Kenilworth Circ	09 30 2009		
	ity <i>N</i> equon	State WI	Zip Code 53092-6199	Transaction ID: 20091008104013-1100 Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		14.00
N	lame of Employer IML	Occupation Asst Gc	n & Asst Sec	
R	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 294.00	
B . <u>G</u>	ull Name (Last, First, Middle Initial) Gregory G. Johnson Mailing Address 507 W Kenilworth Circ	le		Date of Receipt
	ity	State	Zip Code	1 0 1 5 2 0 0 9 Transaction ID: 20091015164625-1098
	Meguon	WI	53092-6199	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		14.00
N	lame of Employer IML	Occupation Asst Gc	n & Asst Sec	
R	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 294.00	
C . <u>G</u>	ull Name (Last, First, Middle Initial) Gregory G. Johnson			Date of Receipt
N	Mailing Address 507 W Kenilworth Circ	le		10 31 2009
	ity	State	Zip Code	Transaction ID: 20091105152628-1098
F	Mequon EC ID number of contributing ederal political committee.	C	53092-6199	Amount of Each Receipt this Period 14.00
N	lame of Employer IML	Occupation Asst Gc	n & Asst Sec	
R	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 294.00	
SUE	BTOTAL of Receipts This Page (optional)			42.00
	TAL This Period (last page this line number			

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 210 / 574 (check only one) X 11a
7	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ 4.	Full Name (Last, First, Middle Initial) Gregory G. Johnson		, rederal rive	Date of Receipt
••	Mailing Address 507 W Kenilworth Circ	cle		1 1 1 5 2 0 0 9
	City <u>Mequon</u>	State WI	Zip Code 53092-6199	Transaction ID: 2009111816423-1097 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		14.00
	Name of Employer NML	Occupation Asst Gc	on & Asst Sec	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 294.00	
- В.	Full Name (Last, First, Middle Initial) Daniel J. Kallay Mailing Address S85W32221 Roberts (Court		Date of Receipt
	City	State	Zip Code	1 1 1 5 2 0 0 9 Transaction ID: 2009111816423-561
	Mukwonago	WI	53149-8224	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		10.00
	Name of Employer NML	Occupation Chief Pil		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 210.00	
-).	Full Name (Last, First, Middle Initial) Shawn F Kelley			Date of Receipt
	Mailing Address 16 Vintage Walk			07 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Cincinnati	State OH	Zip Code 45249-2101	Transaction ID: 20090720-1242-13-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	102-10-21-01	42.00
	Name of Employer Kelley Fncl Grp Inc	Occupation Special /		
	Receipt For: Primary General Other (specify) ▼	, · · · · · · · · · · · · · · · · · · ·	e Year-to-Date ▼ 882.00	
	SUBTOTAL of Receipts This Page (optional)	1		66.00
	TOTAL This Period (last page this line number	only)		

or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	e name and address of any political co	y any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Shawn F Kelley Mailing Address 16 Vintage Walk City Cincinnati FEC ID number of contributing federal political committee.	State Zip Code OH 45249-2101	Date of Receipt M
Name of Employer Kelley Fncl Grp Inc Receipt For: Primary General Other (specify) ▼	Occupation Special Agent Aggregate Year-to-Date ▼	32.00
Full Name (Last, First, Middle Initial) Shawn F Kelley Mailing Address 16 Vintage Walk City	State Zip Code	Date of Receipt M
Cincinnati FEC ID number of contributing federal political committee.	OH 45249-2101	Amount of Each Receipt this Period 42.00
Name of Employer Kelley Fncl Grp Inc Receipt For: Primary General Other (specify)	Occupation Special Agent Aggregate Year-to-Date 88	32.00
Full Name (Last, First, Middle Initial) Shawn F Kelley Mailing Address 16 Vintage Walk	1	Date of Receipt 0 8 3 1 2 0 0 9
City Cincinnati FEC ID number of contributing	State Zip Code OH 45249-2101	Transaction ID: 20090902-64-14-46 Amount of Each Receipt this Period 42.00
federal political committee. Name of Employer Kelley Fncl Grp Inc	Occupation Special Agent	42.00
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	32.00
SUBTOTAL of Receipts This Page (optional)		126.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 212/5/4 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur			
Full Name (Last, First, Middle Initial) Shawn F Kelley			Date of Receipt
Mailing Address 16 Vintage Walk	0 9 1 5 2 0 0 9		
City Cincinnati	State OH	Zip Code 45249-2101	Transaction ID: 20090921-69-16-16 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer Kelley Fncl Grp Inc	Occupatio Special A		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 882.00	
Full Name (Last, First, Middle Initial) Shawn F Kelley			Date of Receipt
Mailing Address 16 Vintage Walk			0 9 3 0 2 0 0 9
City Cincinnati	State OH	Zip Code 45249-2101	Transaction ID: 20091008103448-6 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer Kelley Fncl Grp Inc	Occupatio Special A		
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 882.00	
Full Name (Last, First, Middle Initial) Shawn F Kelley			Date of Receipt
Mailing Address 16 Vintage Walk			10 15 2009
City Cincinnati	State OH	Zip Code 45249-2101	Transaction ID: 2009102293957-69 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	TOETO 2101	42.00
Name of Employer Kelley Fncl Grp Inc	Occupatio Special A		
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 882.00	
SUBTOTAL of Receipts This Page (optional	<u> </u>		126.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 213 / 574 (check only one) X 11a
	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ice Company	/ Federal PAC	
∠ A .	Full Name (Last, First, Middle Initial) Shawn F Kelley			Date of Receipt
	Mailing Address 16 Vintage Walk			10 31 7 2009
	City <u>Cincinnati</u>	State OH	Zip Code 45249-2101	Transaction ID: 20091105152043-69 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Kelley Fncl Grp Inc	Occupation Special /		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 882.00	
- В.	Full Name (Last, First, Middle Initial) Shawn F Kelley			Date of Receipt
	Mailing Address 16 Vintage Walk			11 15 7 2009
	City Cincinnati	State OH	Zip Code 45249-2101	Transaction ID: 20091118163132-69 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Kelley Fncl Grp Inc	Occupation Special /		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 882.00	
с. С.	Full Name (Last, First, Middle Initial) John C. Kelly			Date of Receipt
	Mailing Address 5806 N Kent Avenue			07 15 2009
	City Whitefish Bay	State WI	Zip Code 53217-4612	Transaction ID: 20090720-637-13-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		61.00
	Name of Employer NML	Occupation VP & Co		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1281.00	
	SUBTOTAL of Receipts This Page (optional) .			145.00
f	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 214 / 574 (check only one) X
Any information copied from such Reports or for commercial purposes, other than us	s and Statements may not be sold or used by any perso ing the name and address of any political committee to	
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In:	surance Company Federal PAC	
Full Name (Last, First, Middle Initial) John C. Kelly		Date of Receipt
Mailing Address 5806 N Kent Ave		07 31 2009
City	State Zip Code	Transaction ID: 20090804-637-10-0
Whitefish Bay FEC ID number of contributing federal political committee.	WI 53217-4612	Amount of Each Receipt this Period 61.00
Name of Employer NML	Occupation VP & Controller	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1281.00	
Full Name (Last, First, Middle Initial) John C. Kelly	I	Date of Receipt
Mailing Address 5806 N Kent Ave	enue	08 15 YYYY 2009
City	State Zip Code	Transaction ID: 20090819-704-14-15
Whitefish Bay	WI 53217-4612	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	61.00
Name of Employer NML	Occupation VP & Controller	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1281.00	
Full Name (Last, First, Middle Initial) John C. Kelly		Date of Receipt
Mailing Address 5806 N Kent Ave	enue	08 31 2009
City	State Zip Code	Transaction ID: 20090902-704-15-1
Whitefish Bay	WI 53217-4612	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	61.00
Name of Employer NML	Occupation VP & Controller	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1281.00	
SUBTOTAL of Receipts This Page (opti	onal)	183.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 215 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance			son for the purpose of soliciting contributions o solicit contributions from such committee.
) A.	Full Name (Last, First, Middle Initial) John C. Kelly		,	Date of Receipt
	Mailing Address 5806 N Kent Avenue City	State	Zip Code	0 9 1 5 20090921-700-17-1
	Whitefish Bay FEC ID number of contributing federal political committee.	C	53217-4612	Amount of Each Receipt this Period 61.00
	Name of Employer NML Receipt For: Primary General	Occupation VP & Co	ntroller e Year-to-Date ▼	
- B.	Other (specify) ▼ Full Name (Last, First, Middle Initial) John C. Kelly		1281.00	Date of Receipt
	Mailing Address 5806 N Kent Avenue			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20091008104013-626
	Whitefish Bay FEC ID number of contributing federal political committee.	C	53217-4612	Amount of Each Receipt this Period 61.00
	Name of Employer NML	Occupation VP & Co		
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 1281.00	
с. С.	Full Name (Last, First, Middle Initial) John C. Kelly			Date of Receipt
	Mailing Address 5806 N Kent Avenue			10 15 2009
	City Whitefish Bay	State WI	Zip Code 53217-4612	Transaction ID: 20091015164625-625 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		61.00
	Name of Employer NML	Occupation VP & Co		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1281.00	
	SUBTOTAL of Receipts This Page (optional)			183.00
ļ	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 216 / 574 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may he name and addr	not be sold or used by any personess of any political committee to	
The Northwestern Mutual Life Insura	nce Company	Federal PAC	
Full Name (Last, First, Middle Initial) John C. Kelly			Date of Receipt
Mailing Address 5806 N Kent Avenue			10 31 7 2009
City Whitefish Bay	State WI	Zip Code 53217-4612	Transaction ID: 20091105152628-62 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		61.00
Name of Employer NML	Occupation VP & Con		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1281.00	
Full Name (Last, First, Middle Initial) John C. Kelly			Date of Receipt
Mailing Address 5806 N Kent Avenue			1 1 1 5 2 0 0 9
City	State	Zip Code	Transaction ID: 2009111816423-62
Whitefish Bay FEC ID number of contributing federal political committee.	C	53217-4612	Amount of Each Receipt this Period 61.00
Name of Employer NML	Occupation VP & Con		
Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 1281.00	
Full Name (Last, First, Middle Initial) Troy B Kemelgor			Date of Receipt
Mailing Address 8930 Dunn Court			07 15 2009
City Dublin	State OH	Zip Code 43017-8880	Transaction ID: 20090720-1241-13-
FEC ID number of contributing federal political committee.	C	43017-0000	Amount of Each Receipt this Period 42.00
Name of Employer Self-Employed	Occupation General Ir	nsurance Agent	
Receipt For: Primary General Other (specify) ▼	_ , '	Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)			164.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21//5/4 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	ance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Troy B Kemelgor			Date of Receipt
Mailing Address 8930 Dunn Court			07 31 2009
City <u>Dublin</u>	State OH	Zip Code 43017-8880	Transaction ID: 20090804-1238-10-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 882.00	
Full Name (Last, First, Middle Initial) Troy B Kemelgor			Date of Receipt
Mailing Address 8930 Dunn Court			08 15 2009
City Dublin	State OH	Zip Code 43017-8880	Transaction ID: 20090819-63-14-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 882.00	
Full Name (Last, First, Middle Initial) Troy B Kemelgor			Date of Receipt
Mailing Address 8930 Dunn Court			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Dublin	State OH	Zip Code 43017-8880	Transaction ID: 20090902-63-14-46 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	45017 0000	42.00
Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 882.00	
SUBTOTAL of Receipts This Page (optiona])		126.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	(Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 218/5/4 (check only one) X 11a
Any information copied from such Reports are or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any personess of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	rance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Troy B Kemelgor			Date of Receipt
Mailing Address 8930 Dunn Court			09 15 2009
City Dublin	State OH	Zip Code 43017-8880	Transaction ID: 20090921-67-16-16 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer Self-Employed	Occupation General I	nsurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 882.00	
Full Name (Last, First, Middle Initial) Troy B Kemelgor			Date of Receipt
Mailing Address 8930 Dunn Court			09 30 2009
City Dublin	State OH	Zip Code 43017-8880	Transaction ID: 20091008103448-6 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer Self-Employed	Occupation General I	nsurance Agent	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 882.00	
Full Name (Last, First, Middle Initial) Troy B Kemelgor			Date of Receipt
Mailing Address 8930 Dunn Court			10 15 2009
City Dublin	State OH	Zip Code 43017-8880	Transaction ID: 2009102293957-67 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10017 0000	42.00
Name of Employer Self-Employed	Occupation General I	nsurance Agent	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 882.00	
SUBTOTAL of Receipts This Page (optional	ı al)		126.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 219 / 574 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Troy B Kemelgor Mailing Address 8930 Dunn Court City Dublin FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify)	- '	Zip Code 43017-8880 n Insurance Agent Year-to-Date ▼ 882.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Troy B Kemelgor Mailing Address 8930 Dunn Court City Dublin FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify)	- '	Zip Code 43017-8880 n nsurance Agent Year-to-Date 882.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Robert H Kerrigan, Jr. Mailing Address 1457 N Beverly Drive City Beverly Hills FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify)	State CA C Occupation General	Zip Code 90210-2326 n Insurance Agent Year-to-Date ▼ 2625.00	Date of Receipt M M M D D D 2009 Transaction ID: 20090720-1247-13-1 Amount of Each Receipt this Period 125.00
SUBTOTAL of Receipts This Page (optional) .			209.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 220 / 574 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			
The Northwestern Mutual Life Insurar	nce Company	Federal PAC	
Full Name (Last, First, Middle Initial) Robert H Kerrigan, Jr.			Date of Receipt
Mailing Address 1457 N Beverly Drive			07 31 2009
City	State	Zip Code	Transaction ID: 20090804-1244-10-0
Beverly Hills	CA	90210-2326	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer Self-Employed	Occupation General	n Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2625.00	
Full Name (Last, First, Middle Initial) Robert H Kerrigan, Jr.			Date of Receipt
Mailing Address 1457 N Beverly Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20090819-69-14-0
Beverly Hills	CA	90210-2326	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer Self-Employed	Occupation General	n Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2625.00	
Full Name (Last, First, Middle Initial) Robert H Kerrigan, Jr.			Date of Receipt
Mailing Address 1457 N Beverly Drive			08 31 2009
City	State	Zip Code	Transaction ID: 20090902-69-14-46
Beverly Hills	CA	90210-2326	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer Self-Employed	Occupation General	n Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2625.00	
SUBTOTAL of Receipts This Page (optional) .			375.00

SCHEDULE A (FEC For ITEMIZED RECEIPTS	(m 3X) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 221 / 574 (check only one) X
Any information copied from such Re or for commercial purposes, other that NAME OF COMMITTEE (In Full)	ports and Statements may not be sold or used by any personan using the name and address of any political committee to	
\	e Insurance Company Federal PAC	
Full Name (Last, First, Middle Initi Robert H Kerrigan, Jr.	<u> </u>	Date of Receipt
Mailing Address 1457 N Beve	•	09 15 2009
City Beverly Hills	State Zip Code CA 90210-2326	Transaction ID: 20090921-75-16-16 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2625.00	
Full Name (Last, First, Middle Initi Robert H Kerrigan, Jr.	al)	Date of Receipt
Mailing Address 1457 N Beve	erly Drive	09 30 YYYY 2009
City	State Zip Code	Transaction ID: 20091008103448-75
Beverly Hills	CA 90210-2326	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2625.00	
Full Name (Last, First, Middle Initi Robert H Kerrigan, Jr.	al)	Date of Receipt
Mailing Address 1457 N Beve	orly Drive	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Beverly Hills	State Zip Code CA 90210-2326	Transaction ID: 2009102293957-75
FEC ID number of contributing federal political committee.	C 90210-2526	Amount of Each Receipt this Period 125.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2625.00	
SUPTOTAL of Possints This Page	(optional)	375.00

SCHEDULE A (FEO	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 222 / 574 (check only one) X
Any information copied from s or for commercial purposes, c	uch Reports and Statements mather than using the name and ac	ay not be sold or used by any persoldress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (The Northwestern Mut	In Full) ual Life Insurance Compan	y Federal PAC	
Full Name (Last, First, Mic A. Robert H Kerrigan, Jr.	dle Initial)		Date of Receipt
	N Beverly Drive		10 31 2009
City <u>Beverly</u> Hills	State CA	Zip Code 90210-2326	Transaction ID: 20091105152043-75 Amount of Each Receipt this Period
FEC ID number of contributed federal political committee.			125.00
Name of Employer Self-Employed	Occupation General	on Insurance Agent	
Receipt For: Primary Ge Other (specify) ▼		e Year-to-Date ▼ 2625.00	
Full Name (Last, First, Mic Robert H Kerrigan, Jr. Mailing Address 1457 N	dle Initial) N Beverly Drive		Date of Receipt
			11 15 2009
City	State	Zip Code	Transaction ID: 20091118163132-75
Beverly Hills FEC ID number of contributed federal political committee.	ting CA	90210-2326	Amount of Each Receipt this Period 125.00
Name of Employer Self-Employed	Occupation General	on Insurance Agent	
Receipt For: Primary Other (specify) ▼	Aggregat	e Year-to-Date ▼ 2625.00	
Full Name (Last, First, Mic Mark E. Kishler	dle Initial)		Date of Receipt
Mailing Address 720 E	Wisconsin Avenue		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Milwaukee	State WI	Zip Code 53202-4703	Transaction ID: 20090921-715-17-1
FEC ID number of contribution federal political committee.		53202-4703	Amount of Each Receipt this Period 20.00
Name of Employer NML	Occupation Managir	on ng Director	
Receipt For: Primary Other (specify) ▼		e Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This	s Page (optional)		270.00
	ge this line number only)	<u> </u>	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 223 / 574 (check only one) X
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	by not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	y Federal PAC	
Δ. Α.	Full Name (Last, First, Middle Initial) Mark E. Kishler			Date of Receipt
	Mailing Address 720 E Wisconsin Ave	nue		09 30 7 2009
	City Milwaukee	State WI	Zip Code 53202-4703	Transaction ID: 20091008104013-642 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		20.00
	Name of Employer NML	Occupation	on og Director	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 300.00	
- В.	Full Name (Last, First, Middle Initial) Mark E. Kishler			Date of Receipt
	Mailing Address 720 E Wisconsin Ave	nue		10 15 2009
	City Milwaukee	State WI	Zip Code 53202-4703	Transaction ID: 20091015164625-641 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33202 4700	20.00
	Name of Employer NML	Occupation Managin	on ng Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
с.	Full Name (Last, First, Middle Initial) Mark E. Kishler			Date of Receipt
	Mailing Address 720 E Wisconsin Ave	nue		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Milwaukee	State WI	Zip Code 53202-4703	Transaction ID: 20091105152628-641 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		20.00
	Name of Employer NML	Occupation Managin	on ng Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
	SUBTOTAL of Receipts This Page (optional)			60.00
	TOTAL This Period (last page this line numbe	r only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 224 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	not be sold or used by any perso dress of any political committee to	
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	ce Company	/ Federal PAC	
Full Name (Last, First, Middle Initial) Mark E. Kishler			Date of Receipt
Mailing Address 720 E Wisconsin Aver	nue		1 1 1 5 2 0 0 9
City	State	Zip Code	Transaction ID: 2009111816423-641
Milwaukee	WI	53202-4703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer NML	Occupation	n g Director	
Receipt For:	, i	e Year-to-Date	
Primary General Other (specify) ▼	Aggregate	300.00	
Full Name (Last, First, Middle Initial) Pamela A. Knox	<u> </u>		Date of Receipt
Mailing Address 6109 Audubon Manor	В		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20090720-1080-13-
Lithia	FL	33547	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		16.00
Name of Employer NML	Occupation District D		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 336.00	
Full Name (Last, First, Middle Initial) Pamela A. Knox			Date of Receipt
Mailing Address 6109 Audubon Manor	В		07 31 2009
City	State	Zip Code	Transaction ID: 20090804-1078-10-
Lithia	FL	33547	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		16.00
Name of Employer NML	Occupation District D		
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 336.00	
SUBTOTAL of Receipts This Page (optional)			52.00

TOTAL This Period (last page this line number only)

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 225 / 574 (check only one) X
,	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma ne name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	nce Company	/ Federal PAC	
A .	Full Name (Last, First, Middle Initial) Pamela A. Knox			Date of Receipt
	Mailing Address 6109 Audubon Mano	r B		08 15 2009
	City Lithia	State FL	Zip Code 33547	Transaction ID: 20090819-1144-14-15 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		16.00
	Name of Employer NML	Occupation District [
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 336.00	
_ 3.	Full Name (Last, First, Middle Initial) Pamela A. Knox			Date of Receipt
	Mailing Address 6109 Audubon Mano	r B		08 31 2009
	City	State	Zip Code	Transaction ID: 20090902-1144-15-1
	Lithia FEC ID number of contributing	FL	33547	Amount of Each Receipt this Period
	federal political committee.	C		16.00
	Name of Employer NML	Occupation District D		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	336.00	
-).	Full Name (Last, First, Middle Initial) Pamela A. Knox			Date of Receipt
	Mailing Address 6109 Audubon Mano	r B		09 15 2009
	City Lithia	State FL	Zip Code	Transaction ID: 20090921-1134-17-1
	FEC ID number of contributing federal political committee.	C	33547	Amount of Each Receipt this Period 16.00
	Name of Employer NML	Occupation District [
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 336.00	
	SUBTOTAL of Receipts This Page (optional)	1		48.00

SCHEDULE A (FEC FO	ліп э <i>х)</i>	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 226/5/4 (check only one) X
Any information copied from such F or for commercial purposes, other t	Reports and Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Fu The Northwestern Mutual L	,	Federal PAC	
Full Name (Last, First, Middle In Pamela A. Knox	iitial)		Date of Receipt
•	bon Manor B		0 9 3 0 2 0 0 9
City <u>Lithia</u>	State FL	Zip Code 33547	Transaction ID: 20091008104013-106 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		16.00
Name of Employer NML	Occupatio District D		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	
Full Name (Last, First, Middle In Pamela A. Knox	itial)		Date of Receipt
Mailing Address 6109 Audu	bon Manor B		10 15 YYYYY 10 15 2009
City Lithia	State FL	Zip Code 33547	Transaction ID: 20091015164625-105 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		16.00
Name of Employer NML	Occupatio District D		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 336.00	
Full Name (Last, First, Middle In Pamela A. Knox	itial)		Date of Receipt
	bon Manor B		10 31 2009
City Lithia	State FL	Zip Code 33547	Transaction ID: 20091105152628-105 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	000-17	16.00
Name of Employer NML	Occupatio District D		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 336.00	
SUBTOTAL of Receipts This Pag	e (optional)		48.00

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	for each c	rate schedule(s) category of the Summary Page	FOR LINE NUMBER: PAGE 227 / 574 (check only one) X 11a 11b 11c 12
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may not be sold on the name and address of any p	or used by any perso political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	rance Company Federal PA	AC	
Full Name (Last, First, Middle Initial) Pamela A. Knox			Date of Receipt
Mailing Address 6109 Audubon Ma	nor B		11 1 15 7 9 9
City	State Zip Code	e	Transaction ID: 2009111816423-109
<u>Lithia</u>	FL 33547		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		16.00
Name of Employer NML	Occupation District Director		1
Receipt For:	Aggregate Year-to-Date	▼	
Primary General Other (specify) ▼	30 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	336.00	
Full Name (Last, First, Middle Initial) William S Koch			Date of Receipt
Mailing Address 4645 Swilcan Brido	je Lane S		07 15 / Y Y Y Y Y Y
City	State Zip Code	е	Transaction ID: 20090720-1201-13-
<u>Jacksonville</u>	FL 32224-5	5621	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		75.00
Name of Employer Self-Employed	Occupation General Insurance A	Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	1700.00	
Full Name (Last, First, Middle Initial) William S Koch			Date of Receipt
Mailing Address 4645 Swilcan Brido	je Lane S		07 31 7 2009
City	State Zip Code	e	Transaction ID: 20090804-1199-10-
<u>Jacksonville</u>	FL 32224-5	5621	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		75.00
Name of Employer Self-Employed	Occupation General Insurance A	Agent	7
Receipt For:	Aggregate Year-to-Date		
Primary General Other (specify) ▼		1700.00	
SUBTOTAL of Receipts This Page (option			166.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 228 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura			
/ The Northwestern Mutual Elle Insula	noc company	r cucrar i 710	
Full Name (Last, First, Middle Initial) William S Koch			Date of Receipt
Mailing Address 4645 Swilcan Bridge	Lane S		08 15 2009
City	State	Zip Code	Transaction ID: 20090819-24-14-0
Jacksonville	FL	32224-5621	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		75.00
Name of Employer Self-Employed	Occupation General Ir	nsurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1700.00	
Full Name (Last, First, Middle Initial) William S Koch			Date of Receipt
Mailing Address 4645 Swilcan Bridge	Lane S		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20090902-24-14-46
<u>Jacksonville</u>	<u>FL</u>	32224-5621	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		75.00
Name of Employer Self-Employed	Occupation General In	nsurance Agent	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1700.00]
Full Name (Last, First, Middle Initial) William S Koch			Date of Receipt
Mailing Address 4645 Swilcan Bridge	Lane S		09 15 2009
City	State	Zip Code	Transaction ID: 20090921-24-16-16
<u>Jacksonville</u>	<u>FL</u>	32224-5621	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer Self-Employed		nsurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1700.00	
SUBTOTAL of Receipts This Page (optional)	'		250.00

	OULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 229 / 574 (check only one) X
or for com	nation copied from such Reports and S mercial purposes, other than using the OF COMMITTEE (In Full) lorthwestern Mutual Life Insurance	name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	me (Last, First, Middle Initial) S Koch			Date of Receipt
	Address 4645 Swilcan Bridge L	ane S		09 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Jacks</u>	onville	State FL	Zip Code 32224-5621	Transaction ID: 20091008103448-24 Amount of Each Receipt this Period
	number of contributing political committee.	C		100.00
Name o Self-Er	of Employer nployed	Occupatio General	n Insurance Agent	
	t For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1700.00	
William	me (Last, First, Middle Initial) S Koch	Date of Receipt		
Mailing	Address 4645 Swilcan Bridge L	10 15 Y Y Y Y Y Y Y Y		
City		State	Zip Code	Transaction ID: 2009102293957-24
-	Jacksonville FL FEC ID number of contributing federal political committee.		32224-5621	Amount of Each Receipt this Period
				100.00
Self-Er	of Employer nployed		Insurance Agent	
	t For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1700.00	
	Full Name (Last, First, Middle Initial) William S Koch			Date of Receipt
Mailing	Address 4645 Swilcan Bridge L	ane S		10 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	amidle.	State FL	Zip Code	Transaction ID: 20091105152043-24
FEC ID	onville number of contributing political committee.	C	32224-5621	Amount of Each Receipt this Period
Name o Self-Er	of Employer nployed	Occupatio General	n Insurance Agent	
	t For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1700.00	
SUBTOT	AL of Receipts This Page (optional)			300.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for	e separate schedule(s) each category of the tailed Summary Page	FOR LINE NUMBER: PAGE 230 / 574 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	ne name and address o	of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)			Date of Bassist
William S Koch Mailing Address 4645 Swilcan Bridge	Lane S		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City Jacksonville		ip Code 2224-5621	Transaction ID: 20091118163132-24 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		100.00
Name of Employer Self-Employed	Occupation General Insura	ance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-t	to-Date ▼ 1700.00	
Full Name (Last, First, Middle Initial) William C. Koenig	William C. Koenig		
Mailing Address 541 E Erie Street Un			07 15 2009
City Milwaukee		ip Code 3202-6236	Transaction ID: 20090720-599-13-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	0202 0200	107.00
Name of Employer NML	Occupation Svp & Govt Re	el Actuary	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-t	to-Date ▼ 1498.00	
Full Name (Last, First, Middle Initial) William C. Koenig			Date of Receipt
Mailing Address 541 E Erie Street Un	it 4		07 31 7 9 9
City <u>Milwaukee</u>		ip Code 3202-6236	Transaction ID: 20090804-599-10-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		107.00
Name of Employer NML	Occupation Svp & Govt Re	el Actuary	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-t	to-Date ▼ 1498.00	
	1		

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 231 / 574 (check only one) X
A	Any information copied from such Reports and or for commercial purposes, other than using th	Statements mane name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insural	nce Company	/ Federal PAC	
∠ A.	Full Name (Last, First, Middle Initial) John L. Kordsmeier			Date of Receipt
	Mailing Address 2522 W Daphne Roa	d		07 15 2009
	City <u>Glendale</u>	State WI	Zip Code 53209-3352	Transaction ID: 20090720-1083-13-0
	FEC ID number of contributing federal political committee.	C	30203 3032	Amount of Each Receipt this Period 58.00
	Name of Employer NML	Occupation VP Disal	n pility Income	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1446.00	
— В.	Full Name (Last, First, Middle Initial) John L. Kordsmeier	Date of Receipt		
	Mailing Address 2522 W Daphne Roa	.a		07 31 7 2009
	City Glendale	State WI	Zip Code	Transaction ID: 20090804-1081-10-0
	FEC ID number of contributing federal political committee.	C	53209-3352	Amount of Each Receipt this Period 58.00
	Name of Employer NML	Occupation VP Disal	oility Income	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1446.00	
_ c.	Full Name (Last, First, Middle Initial) John L. Kordsmeier			Date of Receipt
	Mailing Address 2522 W Daphne Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code 53209-3352	Transaction ID: 20090819-1147-14-15
	Glendale WI FEC ID number of contributing federal political committee.		55209-5552	Amount of Each Receipt this Period 58.00
	Name of Employer NML	Occupation VP Disal	on oility Income	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1446.00	
	SUBTOTAL of Receipts This Page (optional)			174.00
	TOTAL This Period (last page this line numbe		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 232 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17		
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persole name and address of any political committee to	on for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company Federal PAC			
Full Name (Last, First, Middle Initial) John L. Kordsmeier		Date of Receipt		
Mailing Address 2522 W Daphne Roa	d	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State Zip Code	Transaction ID: 20090902-1147-15-1		
Glendale	WI 53209-3352	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	58.00		
Name of Employer NML	Occupation VP Disability Income			
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1446.00			
Full Name (Last, First, Middle Initial) John L. Kordsmeier	. L	Date of Receipt		
Mailing Address 2522 W Daphne Roa	Mailing Address 2522 W Daphne Road			
City	State Zip Code	Transaction ID: 20090921-1137-17-1		
Glendale	WI 53209-3352	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	58.00		
Name of Employer NML	Occupation VP Disability Income			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1446.00			
Full Name (Last, First, Middle Initial) John L. Kordsmeier				
Mailing Address 2522 W Daphne Roa				
City	State Zip Code	Transaction ID: 20091008104013-1064		
Glendale	WI 53209-3352	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	58.00		
Name of Employer NML	Occupation VP Disability Income			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	1446.00]		
SUBTOTAL of Receipts This Page (optional)		174.00		
TOTAL This Period (last page this line number	·			

Any information copied from such Reports and State or for commercial purposes, other than using the national purposes. It is a supposed to the national purposes and the national purposes and the national purposes and the national purposes. It is a suppose that the national purposes are the national purposes and the national purposes and the national purposes are the national purposes. It is a suppose that the national purposes are the national purposes and the national purposes are the national purposes. It is a suppose that the national purposes are the national purposes and the national purposes are the		Date of Receipt Transaction ID: 20091015164625-1062 Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) John L. Kordsmeier Mailing Address 2522 W Daphne Road City Glendale FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) John L. Kordsmeier Mailing Address 2522 W Daphne Road City	State Zip Code WI 53209-3352 C Occupation VP Disability Income Aggregate Year-to-Date ▼	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Glendale FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) John L. Kordsmeier Mailing Address 2522 W Daphne Road City	WI 53209-3352 C Occupation VP Disability Income Aggregate Year-to-Date ▼	1 0 1 5 2 0 0 9 Transaction ID: 20091015164625-1062 Amount of Each Receipt this Period
federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) John L. Kordsmeier Mailing Address 2522 W Daphne Road City	Occupation VP Disability Income Aggregate Year-to-Date ▼	58.00
NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) John L. Kordsmeier Mailing Address 2522 W Daphne Road City	VP Disability Income Aggregate Year-to-Date ▼	
John L. Kordsmeier Mailing Address 2522 W Daphne Road City		
•		Date of Receipt 1 0 3 1 2 0 0 9
Glendale	State Zip Code	Transaction ID: 20091105152628-106
FEC ID number of contributing federal political committee.	WI 53209-3352	Amount of Each Receipt this Period 58.00
Name of Employer NML	Occupation VP Disability Income	
Receipt For: ☐ Primary ☐ General Other (specify) ▼	Aggregate Year-to-Date ▼ 1446.00	
Full Name (Last, First, Middle Initial) John L. Kordsmeier Mailing Address 2522 W Daphne Road		Date of Receipt
City	State Zip Code	Transaction ID: 2009111816423-1061
Glendale FEC ID number of contributing federal political committee.	WI 53209-3352	Amount of Each Receipt this Period 58.00
Name of Employer NML	Occupation VP Disability Income	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1446.00	
SUBTOTAL of Receipts This Page (optional)	>	174.00

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В.

C.

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contribution for for commercial purposes, other than using the name and address of any political committee to solicit confributions from such committee. NAME OF COMMITTEE (in Full) The Northwestern Mutual Life Insurance Company Federal PAC Full Name (Last, First, Middle Initial) Sieven H Kosnick Mailing Address 5799 Windsona Circle City State Zip Code WI 53711-5839 FED ID number of contributing federal political committee. C lity State Zip Code WI 53711-5839 FED IN Sieven H Kosnick And Assoc Inc Receipt For: Primary General Other (specify) ▼ State Zip Code WI 53711-5839 FEC ID number of contributing federal political committee. C lity State Zip Code WI 53711-5839 FEC ID number of contributing federal political committee. C lity State Zip Code WI 53711-5839 FEC ID number of contributing federal political committee. C lity State Zip Code WI 53711-5839 FEC ID number of contributing federal political committee. C lity State Zip Code Full Name (Last, First, Middle Initial) Sieven H Kosnick and Assoc Inc Receipt For: Primary General Other (specify) ▼ State Zip Code Full Name (Last, First, Middle Initial) Sieven H Kosnick and Assoc Inc Receipt For: Primary General Other (specify) ▼ State Zip Code Full Name (Last, First, Middle Initial) Sieven H Kosnick and Assoc Inc Receipt For: Primary General Other (specify) ▼ State Zip Code WI 53711-5839 FEC ID number of contributing federal political committee. C lity State Zip Code WI 53711-5839 FEC ID number of contributing federal political committee. C lity State Zip Code WI 53711-5839 FEC ID number of contributing federal political committee. C lity State Zip Code WI 53711-5839 FEC ID number of contributing federal political committee. C lity State Zip Code WI 53711-5839 FEC ID number of contributing federal political committee. C lity State Zip Code WI 53711-5839 FEC ID number of contributing federal p	234 / 574
ANAME OF COMMITTEE (in Full) The Northwestern Mutual Life Insurance Company Federal PAC Full Name (Last, First, Middle Initial) Steven H Kosnick Malling Address 5799 Windsona Circle City Fitchburg FEC ID number of contributing federal political committee. Name of Employer Committee. City Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Steven H Kosnick and Assoc Inc Pill Name (Last, First, Middle Initial) Steven H Kosnick Malling Address 5799 Windsona Circle City State Zip Code WI 53711-5839 Fell Dinumber of contributing federal political committee. Date of Receipt For: Primary General Other (specify) ▼ State Zip Code WI 53711-5839 Date of Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Steven H Kosnick Malling Address 5799 Windsona Circle City State Zip Code WI 53711-5839 Fell Name (Last, First, Middle Initial) Steven H Kosnick and Assoc Inc Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Steven H Kosnick and Assoc Inc Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Steven H Kosnick and Assoc Inc Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Steven H Kosnick and Assoc Inc Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Steven H Kosnick and Assoc Inc Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Steven H Kosnick and Assoc Inc Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Steven H Kosnick and Assoc Inc Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Steven H Kosnick and Assoc Inc Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Steven H Kosnick and Assoc Inc Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Steven H Kosnick and Assoc Inc Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Steven H Kosnick and Assoc Inc Primary General Other (specify) ▼ Full	12 16 17
NAME OF COMMITTEE (in Full) The Northwestern Mutual Life Insurance Company Federal PAC Full Name (Last, First, Middle Initial) Steven H Kosnick Mailing Address 5799 Windsona Circle City State Zip Code WI 53711-5839 FEC ID number of contributing federal political committee. Name of Employer Kosnick and Assoc Inc City State Zip Code WI 53711-5839 FEC ID number of contributing federal political committee. Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Steven H Kosnick Mailing Address 5799 Windsona Circle City State Zip Code WI 53711-5839 FEC ID number of contributing federal political committee. Coccupation Special Agent Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Steven H Kosnick Mailing Address 5799 Windsona Circle City State Zip Code WI 53711-5839 FEC ID number of contributing federal political committee. Coccupation Special Agent Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Steven H Kosnick Mailing Address 5799 Windsona Circle City State Zip Code WI 53711-5839 FEC ID number of contributing federal political committee. Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Steven H Kosnick Mailing Address 5799 Windsona Circle City State Zip Code WI 53711-5839 Date of Receipt Amount of Each Receipt this Periode Transaction ID: 20090804-115 Amount of Each Receipt this Periode Primary General Other (specify) ▼ Amount of Each Receipt this Periode Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Amount of Each Receipt this Periode Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	ributions
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Steven H Kosnick Mailing Address 5799 Windsona Circle City State Zip Code WI 53711-5839 FEC ID number of contributing federal political committee. Name of Employer Kosnick and Assoc Inc Special Agent FEC ID number of contributing federal political committee. Coccupation Special Agent Receipt For: Primary General WI 53711-5839 FEC ID number of contributing federal political committee. City State Zip Code WI 53711-5839 Date of Receipt Amount of Each Receipt this Peri Amount of Each Receipt this Peri Transaction ID: 20090804-11s Amount of Each Receipt this Peri Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ State Zip Code WI 53711-5839 Full Name (Last, First, Middle Initial) Steven H Kosnick Mailing Address 5799 Windsona Circle City State Zip Code WI 53711-5839 Date of Receipt Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼	
City State Zip Code Transaction ID: 20090720-115 2.0	
Fitchburg	2009
FEC ID number of contributing federal political committee. Name of Employer Kosnick and Assoc Inc	-1195-13-1
Receipt For: General Political committee. Primary General Aggregate Year-to-Date Primary General Date of Receipt Aggregate Year-to-Date Primary General Aggregate Year-to-Date Primary General Aggregate Year-to-Date Primary General	Period
Special Agent Receipt For: Primary General Ge	42.00
Primary Other (specify) ▼ 882.00 Full Name (Last, First, Middle Initial) Steven H Kosnick Mailing Address 5799 Windsona Circle City State Zip Code WI 53711-5839 FEC ID number of contributing federal political committee. Name of Employer Kosnick and Assoc Inc Primary Other (specify) ▼ 882.00 City State Zip Code Primary General Other (specify) ▼ 882.00 Date of Receipt Transaction ID: 20090804-115 Amount of Each Receipt this Peri Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ State Zip Code WI 53711-5839 Date of Receipt Transaction ID: 20090804-115 Amount of Each Receipt this Peri B82.00 Date of Receipt Transaction ID: 20090804-115 Amount of Each Receipt this Peri B82.00 Date of Receipt Transaction ID: 20090804-115 Amount of Each Receipt this Peri B82.00 Date of Receipt Transaction ID: 20090804-115 Amount of Each Receipt this Peri B82.00 Transaction ID: 20090819-18 Amount of Each Receipt this Peri B82.00 Transaction ID: 20090819-18 Amount of Each Receipt this Peri B82.00 Transaction ID: 20090819-18 Amount of Each Receipt this Peri B82.00 Transaction ID: 20090804-115 B82.00 Transaction ID: 20090804-115 B82.00 Transaction ID: 20090819-18 Amount of Each Receipt this Peri B82.00 Transaction ID: 20090819-18 Amount of Each Receipt this Peri B82.00 Transaction ID: 20090819-18 Amount of Each Receipt this Peri B82.00 Transaction ID: 20090819-18 Amount of Each Receipt this Peri B82.00 Transaction ID: 20090819-18 Amount of Each Receipt this Peri B82.00 Transaction ID: 20090804-115 B82.00	
Other (specify) ▼ Full Name (Last, First, Middle Initial) Steven H Kosnick Mailing Address 5799 Windsona Circle City Fitchburg FEC ID number of contributing federal political committee. City Primary Other (specify) ▼ State Zip Code WI 53711-5839 City Special Agent Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Steven H Kosnick Mailing Address 5799 Windsona Circle City State Zip Code Special Agent Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Steven H Kosnick Mailing Address 5799 Windsona Circle City State Zip Code WI 53711-5839 Date of Receipt Amount of Each Receipt this Perivation Name (Last, First, Middle Initial) Steven H Kosnick Mailing Address 5799 Windsona Circle City State Zip Code WI 53711-5839 City City State Zip Code Transaction ID: 20090819-18- Amount of Each Receipt this Perivation Amount of Each Receipt Terms Amount of Each Receipt this Perivation ID: 20090819-18- Amount of Each Receipt This Perivati	
Steven H Kosnick Mailing Address 5799 Windsona Circle City State Zip Code WI 53711-5839 FEC ID number of contributing federal political committee. Name of Employer Kosnick and Assoc Inc Primary General Other (specify) ▼ City State Zip Code WI 53711-5839 Full Name (Last, First, Middle Initial) Steven H Kosnick Mailing Address 5799 Windsona Circle City State Zip Code MI 53711-5839 FEC ID number of contributing federal political committee. Name of Employer Kosnick Mailing Address 5799 Windsona Circle City State Zip Code WI 53711-5839 FEC ID number of contributing federal political committee. Name of Employer Kosnick and Assoc Inc Receipt For: WI 53711-5839 FEC ID number of contributing federal political committee. Name of Employer Kosnick and Assoc Inc Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary Aggregate Year-to-Date ▼	
City State Zip Code WI 53711-5839 FEC ID number of contributing federal political committee. Name of Employer Kosnick and Assoc Inc Primary General Other (specify) ▼ City State Zip Code WI 53711-5839 City State Zip Code WI 53711-5839 Date of Receipt Malling Address 5799 Windsona Circle City State Zip Code WI 53711-5839 FEC ID number of contributing federal political committee. Name of Employer Kosnick and Assoc Inc Receipt For: Primary General Other (specify) ▼ City State Zip Code WI 53711-5839 FEC ID number of contributing federal political committee. Name of Employer Kosnick and Assoc Inc Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Amount of Each Receipt this Perion Name of Employer Kosnick and Assoc Inc Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼	
Fitchburg WI 53711-5839 Amount of Each Receipt this Perinfederal political committee. Name of Employer Kosnick and Assoc Inc Receipt For: Primary General Other (specify) ▼ State Zip Code WI 53711-5839 FEC ID number of contributing federal political committee. Name of Employer Kosnick Mailing Address 5799 Windsona Circle City State Zip Code WI 53711-5839 FEC ID number of contributing federal political committee. Name of Employer Kosnick and Assoc Inc Receipt For: Primary General Occupation Special Agent Amount of Each Receipt this Perinfederal Political Committee. Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ B82.00	2009
FEC ID number of contributing federal political committee. Name of Employer Kosnick and Assoc Inc Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Steven H Kosnick Mailing Address 5799 Windsona Circle City State Zip Code WI 53711-5839 FEC ID number of contributing federal political committee. Name of Employer Kosnick and Assoc Inc Receipt For: Quantification ID: 20090819-18- Amount of Each Receipt this Peric Special Agent Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ 882.00	-1193-10-0
Name of Employer Kosnick and Assoc Inc Receipt For: Primary General Other (specify) ▼ State Zip Code Fitchburg FEC ID number of contributing federal political committee. Name of Employer Kosnick and Assoc Inc Post of Receipt Aggregate Year-to-Date ▼ Date of Receipt M M M D D D D D D D D D D D D D D D D	Period
Receipt For:	42.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Steven H Kosnick Mailing Address 5799 Windsona Circle City State Zip Code Fitchburg WI 53711-5839 FEC ID number of contributing federal political committee. Name of Employer Kosnick and Assoc Inc Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ B82.00 Date of Receipt M M	
Full Name (Last, First, Middle Initial) Steven H Kosnick Mailing Address 5799 Windsona Circle City State Zip Code Fitchburg WI 53711-5839 FEC ID number of contributing federal political committee. Name of Employer Kosnick and Assoc Inc Receipt For: Primary General Other (specify) Aggregate Year-to-Date Aggregate Year-to-Date 882.00	
Steven H Kosnick Mailing Address 5799 Windsona Circle City State Zip Code Fitchburg WI 53711-5839 FEC ID number of contributing federal political committee. Name of Employer Kosnick and Assoc Inc Receipt For: Primary General Other (specify) ▼ Date of Receipt M M / D D / Y Y Y O / 2 0 Transaction ID: 20090819-18- Amount of Each Receipt this Period Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ 882.00	
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Fitchburg FEC ID number of contributing federal political committee. Name of Employer Kosnick and Assoc Inc Receipt For: Primary Other (specify) Amount of Each Receipt this Period Aggregate Year-to-Date Aggregate Year-to-Date 882.00	2009
FEC ID number of contributing federal political committee. Name of Employer Kosnick and Assoc Inc Receipt For: Primary General Other (specify) 882.00	
Name of Employer Kosnick and Assoc Inc Receipt For: Primary Other (specify) ▼ Occupation Special Agent Aggregate Year-to-Date ▼ 882.00	Period
Receipt For: Primary Other (specify) ▼ Special Agent Aggregate Year-to-Date ▼ 882.00	42.00
Primary General Other (specify) 882.00	
106	
SUBTOTAL of Receipts This Page (optional)	126.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	foi	se separate schedule(s) r each category of the etailed Summary Page	FOR LINE NUMBER: PAGE 235 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	e name and address	of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Steven H Kosnick Mailing Address 5799 Windsona Circle City Fitchburg FEC ID number of contributing	State 2	Zip Code 53711-5839	Date of Receipt M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary Other (specify) General	Occupation Special Agent Aggregate Year]
Full Name (Last, First, Middle Initial) Steven H Kosnick Mailing Address 5799 Windsona Circle	9		Date of Receipt 0 9 15 2009
City		Zip Code	Transaction ID: 20090921-19-16-16
Fitchburg FEC ID number of contributing federal political committee. Name of Employer	C Occupation	53711-5839	Amount of Each Receipt this Period 42.00
Kosnick and Assoc Inc Receipt For: Primary General Other (specify) ▼	Special Agent Aggregate Year		
Full Name (Last, First, Middle Initial) Steven H Kosnick			Date of Receipt
Mailing Address 5799 Windsona Circle	sona Circle		09 / 30 / 2009
City Fitchburg		Zip Code 53711-5839	Transaction ID: 20091008103448-19
FEC ID number of contributing federal political committee.	C	55711-5009	Amount of Each Receipt this Period 42.00
Name of Employer Kosnick and Assoc Inc	Occupation Special Agent		
Receipt For: Primary General Other (specify) ▼	Aggregate Year		
SUBTOTAL of Receipts This Page (optional) .			126.00

SCHEDULE A	EIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 236 / 574 (check only one) X 11a
or for commercial purpo	ses, other than using the name and	address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
City	799 Windsona Circle State	Zip Code	Date of Receipt 1 0 1 5 2009102293957-19
Fitchburg FEC ID number of c federal political com		53711-5839	Amount of Each Receipt this Period 42.00
Name of Employer Kosnick and Assoc Receipt For: Primary Other (specify	Aggreg General	tion I Agent ate Year-to-Date ▼	
Full Name (Last, Fire Steven H Kosnick Mailing Address 5	st, Middle Initial) 799 Windsona Circle		Date of Receipt 1 0 3 1 2 0 0 9
City Fitchburg FEC ID number of c federal political comi		Zip Code 53711-5839	Transaction ID: 20091105152043-19 Amount of Each Receipt this Period 42.00
Name of Employer Kosnick and Assoc Receipt For: Primary Other (specify	Aggreg General	tion I Agent ate Year-to-Date ▼ 882.00	
Full Name (Last, Fire Steven H Kosnick		Date of Receipt	
City Fitchburg FEC ID number of c		Zip Code 53711-5839	Transaction ID: 20091118163132-19 Amount of Each Receipt this Period 42.00
Name of Employer Kosnick and Assoc	nc Occupa Specia	l Agent	
Receipt For: Primary Other (specify	General	ate Year-to-Date ▼ 882.00	
SUBTOTAL of Receip	ts This Page (optional)		126.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 237 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
_	Full Name (Last, First, Middle Initial)	Ce Company	y i edelai FAO	
Α.	Robert J. Kowalsky Mailing Address 4791 N Larkin Street	Date of Receipt 1 1 1 5 2 0 0 9		
	City Whitefish Bay	State WI	Zip Code 53211-1152	Transaction ID: 2009111816423-1037 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		10.00
	Name of Employer NML	Occupation VP IS	on	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 210.00	
- В.	Full Name (Last, First, Middle Initial) Carol L. Kracht Mailing Address 449 E Cedar Lane	Date of Receipt 0 7 1 5 2 0 0 9		
	City	State	Zip Code	Transaction ID: 20090720-1006-13-0
	Mequon FEC ID number of contributing federal political committee.	C	53092-6102	Amount of Each Receipt this Period 32.00
	Name of Employer NML	Occupation VP Dep	on Gc/Sec & Board Rel	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 672.00	
- C.	Full Name (Last, First, Middle Initial) Carol L. Kracht			Date of Receipt
	Mailing Address 449 E Cedar Lane			
	City Mequon	State WI	Zip Code 53092-6102	Transaction ID: 20090804-1004-10-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		32.00
	Name of Employer NML	Occupation VP Dep	on Gc/Sec & Board Rel	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 672.00	
	SUBTOTAL of Receipts This Page (optional)			74.00
T	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 238 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	e name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Carol L. Kracht Mailing Address 449 E Cedar Lane City Mequon FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary Other (specify)	State Zip Code WI 53092-6102 C Occupation VP Dep Gc/Sec & Board Rel Aggregate Year-to-Date ▼ 672.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Carol L. Kracht Mailing Address 449 E Cedar Lane City Mequon FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53092-6102 C Occupation VP Dep Gc/Sec & Board Rel Aggregate Year-to-Date ▼ 672.00	Date of Receipt M M J D D D J 2009 Transaction ID: 20090902-1071-15-1 Amount of Each Receipt this Period 32.00
Full Name (Last, First, Middle Initial) Carol L. Kracht Mailing Address 449 E Cedar Lane City Mequon FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53092-6102 C Occupation VP Dep Gc/Sec & Board Rel Aggregate Year-to-Date 672.00	Date of Receipt M M J D D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	1	96.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 239 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
	The Northwestern Mutual Life Insuran	ice Company	/ Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Carol L. Kracht	Date of Receipt		
	Mailing Address 449 E Cedar Lane			09 30 7 2009
	City <u>Mequon</u>	State WI	Zip Code 53092-6102	Transaction ID: 20091008104013-990 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		32.00
	Name of Employer NML	Occupation VP Dep	on Gc/Sec & Board Rel	
	Receipt For: Primary General Other (specify) ▼	, '	e Year-to-Date ▼ 672.00	
- В.	Full Name (Last, First, Middle Initial) Carol L. Kracht Mailing Address 440 F. Cadar Lane	Date of Receipt		
	Mailing Address 449 E Cedar Lane			10 15 2009
	City Meguon	State WI	Zip Code 53092-6102	Transaction ID: 20091015164625-989 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		32.00
	Name of Employer NML	Occupation VP Dep	on Gc/Sec & Board Rel	
	Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	e Year-to-Date ▼ 672.00	
- C.	Full Name (Last, First, Middle Initial) Carol L. Kracht			Date of Receipt
	Mailing Address 449 E Cedar Lane			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20091105152628-989
	Mequon FEC ID number of contributing federal political committee.	C	53092-6102	Amount of Each Receipt this Period 32.00
	Name of Employer NML	Occupation VP Dep	on Gc/Sec & Board Rel	
	Receipt For: Primary General Other (specify) ▼	, ' 	e Year-to-Date ▼ 672.00	
	SUBTOTAL of Receipts This Page (optional) .			96.00
	TOTAL This Period (last page this line number			

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 240 / 574 (check only one) X 11a
7	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insurar	ice Company	/ Federal PAC	
Δ.	Full Name (Last, First, Middle Initial) Carol L. Kracht			Date of Receipt
	Mailing Address 449 E Cedar Lane	11 1 15 2009		
	City Meguon	State WI	Zip Code 53092-6102	Transaction ID: 2009111816423-988 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		32.00
	Name of Employer NML	Occupation VP Dep	on Gc/Sec & Board Rel	
	Receipt For: Primary General Other (specify)	- '	e Year-to-Date ▼ 672.00	
- В.	Full Name (Last, First, Middle Initial) Todd L. Laszewski	Date of Receipt		
	Mailing Address 2604 N 90th Street			09 / 15 / 2009
	City Wauwatosa	State WI	Zip Code 53226-1813	Transaction ID: 20090921-984-17-1
	FEC ID number of contributing federal political committee.	C	33220-1013	Amount of Each Receipt this Period 15.00
	Name of Employer NML	Occupation Dir Lp D		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 267.00	
- C.	Full Name (Last, First, Middle Initial) Todd L. Laszewski			Date of Receipt
	Mailing Address 2604 N 90th Street			0 9 3 0 2 0 0 9
	City	State WI	Zip Code	Transaction ID: 20091008104013-911
	Wauwatosa FEC ID number of contributing federal political committee.	C	53226-1813	Amount of Each Receipt this Period 15.00
	Name of Employer NML	Occupation Dir Lp D		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 267.00	
	SUBTOTAL of Receipts This Page (optional) .	1		62.00
-	TOTAL This Period (last page this line numbe			

	ULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 241 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for comn	nercial purposes, other than using the	Statements mage name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
1 \	OF COMMITTEE (In Full) orthwestern Mutual Life Insuran	ce Company	Federal PAC	
A. Todd L.	ne (Last, First, Middle Initial) Laszewski Address 2604 N 90th Street			Date of Receipt
	Address 2604 N 90th Street	Ctata	7in Codo	10 15 2009
City <u>Wauw</u>	atosa	State WI	Zip Code 53226-1813	Transaction ID: 20091015164625-910 Amount of Each Receipt this Period
	number of contributing political committee.	C		15.00
Name o	f Employer	Occupation Dir Lp De		
	For: rimary General ther (specify) ▼	Aggregate	e Year-to-Date ▼ 267.00	
	ne (Last, First, Middle Initial) Laszewski	1		Date of Receipt
Mailing .	Address 2604 N 90th Street			10 31 2009
City		State	Zip Code	Transaction ID: 20091105152628-910
Wauw		WI	53226-1813	Amount of Each Receipt this Period
federal p	number of contributing political committee.	C		15.00
Name of NML	f Employer	Occupation Dir Lp De		
Receipt		Aggregate	e Year-to-Date ▼	
	rimary	0 0	267.00	
	ne (Last, First, Middle Initial) Laszewski	1		Date of Receipt
Mailing /	Address 2604 N 90th Street			M M / D D / Y Y Y Y Y Y 1 1 1 1 5 2009
City	otogo	State WI	Zip Code	Transaction ID: 2009111816423-910
	number of contributing political committee.	C	53226-1813	Amount of Each Receipt this Period 15.00
Name o	f Employer	Occupatio Dir Lp De		7
	For: rimary General ther (specify) ▼	Aggregate	e Year-to-Date ▼ 267.00	
SUBTOTA	AL of Receipts This Page (optional)			45.00
	his Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 242 / 574 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insural	Statements may not be sold or used by any persole name and address of any political committee to note Company Federal PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Michael K Lawhon Mailing Address 6952 Burnt Sienna C City Naples FEC ID number of contributing federal political committee. Name of Employer South Florida Grp LLC Receipt For: Primary General	State Zip Code FL 34109-7826 C Occupation Special Agent Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) Full Name (Last, First, Middle Initial) Michael K Lawhon Mailing Address 6952 Burnt Sienna C City Naples FEC ID number of contributing federal political committee.	882.00	Date of Receipt M M M
Name of Employer South Florida Grp LLC Receipt For: Primary General Other (specify) ▼	Occupation Special Agent Aggregate Year-to-Date ▼ 882.00	
Full Name (Last, First, Middle Initial) Michael K Lawhon Mailing Address 6952 Burnt Sienna C City Naples	ircle State Zip Code FL 34109-7826	Date of Receipt M M
FEC ID number of contributing federal political committee. Name of Employer South Florida Grp LLC	Occupation Special Agent	42.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 882.00	
SUBTOTAL of Receipts This Page (optional)		126.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 243 / 574 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	d Statements may not be sold or used by any pers the name and address of any political committee to ance Company Federal PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Michael K Lawhon Mailing Address 6952 Burnt Sienna C City Naples	State Zip Code FL 34109-7826	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer South Florida Grp LLC Receipt For: Primary General Other (specify)	Occupation Special Agent Aggregate Year-to-Date 882.00	42.00
Full Name (Last, First, Middle Initial) Michael K Lawhon Mailing Address 6952 Burnt Sienna C		Date of Receipt 0 9 / 1 5 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code FL 34109-7826	Transaction ID: 20090921-62-16-16
Naples FEC ID number of contributing federal political committee.	FL 34109-7826 C Occupation	Amount of Each Receipt this Period 42.00
Name of Employer South Florida Grp LLC Receipt For: Primary General Other (specify) ▼	Special Agent Aggregate Year-to-Date ▼ 882.00	
Full Name (Last, First, Middle Initial) Michael K Lawhon		Date of Receipt
Mailing Address 6952 Burnt Sienna C		09 / 30 / 2009
City <u>Naples</u>	State Zip Code FL 34109-7826	Transaction ID: 20091008103448-62 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 34103-7620	42.00
Name of Employer South Florida Grp LLC	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 882.00	
SUBTOTAL of Receipts This Page (optional)	'	126.00

IT	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	for each cate Detailed Sun	e schedule(s) egory of the nmary Page	FOR LINE NUMBER: PAGE 244 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ai	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and address of any poli	tical committee to so	or the purpose of soliciting contributions licit contributions from such committee.
<u>∠_</u> A .	Full Name (Last, First, Middle Initial) Michael K Lawhon Mailing Address 6952 Burnt Sienna Cir	cle		Date of Receipt 10 15 2009
	City Naples	State Zip Code FL 34109-782	26	Transaction ID: 2009102293957-62 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer South Florida Grp LLC	Occupation Special Agent		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	882.00	
 3.	Full Name (Last, First, Middle Initial) Michael K Lawhon Mailing Address 6952 Burnt Sienna Cir	cle		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code		Transaction ID: 20091105152043-62
	Naples FEC ID number of contributing federal political committee.	FL 34109-782	26	Amount of Each Receipt this Period 42.00
	Name of Employer South Florida Grp LLC	Occupation Special Agent		
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date	882.00	
	Full Name (Last, First, Middle Initial) Michael K Lawhon			Date of Receipt
	Mailing Address 6952 Burnt Sienna Cir	cle		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Naples	State Zip Code FL 34109-782	26	Transaction ID: 20091118163132-62 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer South Florida Grp LLC	Occupation Special Agent		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	882.00	
s	SUBTOTAL of Receipts This Page (optional) .	1		126.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 245 / 574 (check only one) X
Ai	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
<u>/_</u> \.	Full Name (Last, First, Middle Initial) Brian E. Lee Mailing Address 3118 Hunt Road	Chair	7'o Cada	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Oakton	State VA	Zip Code 22124-1314	Transaction ID: 20090819-832-14-15 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		7.00
	Name of Employer NML	Occupatio Director-	n Field Production	
	Receipt For: Primary General Other (specify) ▼	, '	e Year-to-Date ▼ 243.00	
3.	Full Name (Last, First, Middle Initial) Brian E. Lee Mailing Address 3118 Hunt Road	<u> </u>		Date of Receipt 0 8 3 1 2 0 0 9
	City	State	Zip Code	Transaction ID: 20090902-832-15-1
	Oakton FEC ID number of contributing federal political committee.	C	22124-1314	Amount of Each Receipt this Period 7.00
	Name of Employer NML	Occupatio Director-	n Field Production	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 243.00	
	Full Name (Last, First, Middle Initial) Brian E. Lee	<u> </u>		Date of Receipt
	Mailing Address 3118 Hunt Road			0 9 1 5 2 0 0 9
	City Oakton	State VA	Zip Code 22124-1314	Transaction ID: 20090921-827-17-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	22127 1017	7.00
	Name of Employer NML	Occupatio Director-	n Field Production	
	Receipt For: Primary General Other (specify) ▼	, '	e Year-to-Date ▼ 243.00	
s	SUBTOTAL of Receipts This Page (optional)	1		21.00

ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 246 / 5 / 4 (check only one)
Any information copied from such Reports at or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any persongers of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	rance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Brian E. Lee			Date of Receipt
Mailing Address 3118 Hunt Road			09 30 2009
City Oakton	State VA	Zip Code 22124-1314	Transaction ID: 20091008104013-75 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		7.00
Name of Employer NML	Occupation Director-	n Field Production	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 243.00	
Full Name (Last, First, Middle Initial) Brian E. Lee			Date of Receipt
Mailing Address 3118 Hunt Road			10 15 2009
City Oakton	State VA	Zip Code 22124-1314	Transaction ID: 20091015164625-75 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		7.00
Name of Employer NML	Occupation Director-	n Field Production	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 243.00]
Full Name (Last, First, Middle Initial) Brian E. Lee			Date of Receipt
Mailing Address 3118 Hunt Road			10 31 2009
City Oakton	State VA	Zip Code 22124-1314	Transaction ID: 20091105152628-75 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	ZETET TOTT	7.00
Name of Employer NML	Occupation Director-	n Field Production	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 243.00	
SUBTOTAL of Receipts This Page (optional	al)		21.00

	Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	d Statements may not be sold or used by any personant the name and address of any political committee to ance Company Federal PAC	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Brian E. Lee Mailing Address 3118 Hunt Road City Oakton FEC ID number of contributing federal political committee. Name of Employer NML	State Zip Code VA 22124-1314 C Occupation	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼	Director-Field Production Aggregate Year-to-Date ▼ 243.00	
Full Name (Last, First, Middle Initial) Gilbert Robert Llanas Mailing Address 1322 Edgewood Ave	State Zip Code	Date of Receipt 1 1 5 2 0 0 9 Transaction ID: 2009111816423-783
South Milwauk FEC ID number of contributing federal political committee. Name of Employer NML	WI 53172-3573 C Occupation	Amount of Each Receipt this Period 10.00
Receipt For: Primary General Other (specify) ▼	Dir Comm Rel Aggregate Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) Werner Loots Mailing Address 121 W Chestnut Str	reet	Date of Receipt 0 7 1 5 2 0 0 9
City Chicago FEC ID number of contributing federal political committee.	State Zip Code IL 60610-3175 C	Transaction ID: 20090720-624-13-0 Amount of Each Receipt this Period 33.00
Name of Employer	Occupation Rvp Fld Supv	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 693.00	
SUBTOTAL of Receipts This Page (optional))	50.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 248 / 574 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	Statements may not be sold or used by any persite name and address of any political committee to note Company Federal PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Werner Loots Mailing Address 121 W Chestnut Stree City Chicago FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary Other (specify)	State Zip Code IL 60610-3175 C Occupation Rvp Fld Supv Aggregate Year-to-Date 693.00	Date of Receipt M M M / D D / Y Y Y Y Y O 7 3 1 2 0 0 9 Transaction ID: 20090804-624-10-0 Amount of Each Receipt this Period 33.00
Full Name (Last, First, Middle Initial) Werner Loots Mailing Address 2664 N Summit Aven City Milwaukee FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53211-3849 C Occupation Rvp Fld Supv Aggregate Year-to-Date ▼ 693.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 20090819-691-14-15 Amount of Each Receipt this Period 33.00
Full Name (Last, First, Middle Initial) Werner Loots Mailing Address 2664 N Summit Aven City Milwaukee FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53211-3849 C Occupation Rvp Fld Supv Aggregate Year-to-Date ▼ 693.00	Date of Receipt M M M / D D D / Y Y Y Y Y Transaction ID: 20090902-691-15-1 Amount of Each Receipt this Period 33.00
SUBTOTAL of Receipts This Page (optional) .	· 	99.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	A)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 249/5/4 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	ırance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Werner Loots			Date of Receipt
Mailing Address 2664 N Summit Av	venue		0 9 1 5 2 0 0 9
City Milwaukee	State WI	Zip Code 53211-3849	Transaction ID: 20090921-687-17-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		33.00
Name of Employer NML	Occupation Rvp Fld S		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 693.00	
Full Name (Last, First, Middle Initial) Werner Loots	I		Date of Receipt
Mailing Address 2664 N Summit Av	venue		M M / D D / Y Y Y Y Y O D O O O O O O O O O O O O O
City Milwaukee	State WI	Zip Code 53211-3849	Transaction ID: 20091008104013-6 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		33.00
Name of Employer NML	Occupation Rvp Fld S		
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 693.00	
Full Name (Last, First, Middle Initial) Werner Loots			Date of Receipt
Mailing Address 2664 N Summit Av	venue		10 15 2009
City Milwaukee	State WI	Zip Code 53211-3849	Transaction ID: 20091015164625-61 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33211-3049	33.00
Name of Employer NML	Occupation Rvp Fld		
Receipt For: Primary General Other (specify) ▼	- ' '	e Year-to-Date ▼ 693.00	
SUBTOTAL of Receipts This Page (option	al)		99.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	foi	se separate schedule(s) r each category of the etailed Summary Page	FOR LINE NUMBER: PAGE 250 / 5 / 4 (check only one)
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may not b	pe sold or used by any perso of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Inst	•		
Full Name (Last, First, Middle Initial) Werner Loots			Date of Receipt
Mailing Address 2664 N Summit A	venue		M M / D D / Y Y Y Y
City Milwaukee		Zip Code 53211-3849	Transaction ID: 20091105152628-61 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		33.00
Name of Employer NML	Occupation Rvp Fld Supv		
Receipt For: Primary General Other (specify) ▼	Aggregate Year	-to-Date ▼ 693.00	
Full Name (Last, First, Middle Initial) Werner Loots			Date of Receipt
Mailing Address 2664 N Summit A	venue		M M / D D / Y Y Y Y Y 1 1 1 1 5 2 0 0 9
City Milwaukee		Zip Code 53211-3849	Transaction ID: 2009111816423-612
FEC ID number of contributing federal political committee.	C	33211-3049	Amount of Each Receipt this Period 33.00
Name of Employer NML	Occupation Rvp Fld Supv		
Receipt For: Primary General Other (specify) ▼	Aggregate Year	-to-Date ▼ 693.00	
Full Name (Last, First, Middle Initial) Robert D Lowrey			Date of Receipt
Mailing Address 1108 W Goldthrea	ad Circle		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Sioux Falls		Zip Code 57108-2824	Transaction ID: 20090720-1200-13-
FEC ID number of contributing federal political committee.	C	07106-2624	Amount of Each Receipt this Period 42.00
Name of Employer Self-Employed	Occupation General Insur	ance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year		
SUBTOTAL of Receipts This Page (option	nal)		108.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 251 / 574 (check only one) X
or f	r information copied from such Reports and Sor commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insuran	ice Company	/ Federal PAC	
	Full Name (Last, First, Middle Initial) Robert D Lowrey			Date of Receipt
I	Mailing Address 1108 W Goldthread C	Circle		07 31 7 2009
	City	State	Zip Code	Transaction ID: 20090804-1198-10-0
•	Sioux Falls	SD	57108-2824	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
Ī	Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
Ī	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		882.00	
	Full Name (Last, First, Middle Initial) Robert D Lowrey			Date of Receipt
-	Mailing Address 1108 W Goldthread C	Circle		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20090819-23-14-0
-	Sioux Falls	SD	57108-2824	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
Ī	Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
Ī	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		882.00	
	Full Name (Last, First, Middle Initial) Robert D Lowrey			Date of Receipt
-	Mailing Address 1108 W Goldthread C	ircle		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20090902-23-14-46
	Sioux Falls	SD	57108-2824	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
Ī	Name of Employer Self-Employed	Occupation General	n Insurance Agent	
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 882.00	
SU	IBTOTAL of Receipts This Page (optional) .			126.00
	OTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 252 / 5 / 4 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	<u> </u>	•	
Full Name (Last, First, Middle Initial) Robert D Lowrey			Date of Receipt
Mailing Address 1108 W Goldthrea	d Circle		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Sioux Falls	State SD	Zip Code 57108-2824	Transaction ID: 20090921-23-16-16 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer Self-Employed	Occupation General	n Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 882.00	
Full Name (Last, First, Middle Initial) Robert D Lowrey	I		Date of Receipt
Mailing Address 1108 W Goldthrea	d Circle		0 9 3 0 Y Y Y Y Y Y
City Sioux Falls	State SD	Zip Code 57108-2824	Transaction ID: 20091008103448-2
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer Self-Employed	Occupation General	n Insurance Agent	
Receipt For: Primary General Other (specify)		Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Robert D Lowrey			Date of Receipt
Mailing Address 1108 W Goldthrea	d Circle		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Sioux Falls	State SD	Zip Code	Transaction ID: 2009102293957-23
FEC ID number of contributing federal political committee.	C	57108-2824	Amount of Each Receipt this Period 42.00
Name of Employer Self-Employed	Occupation General	n Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 882.00	
SUBTOTAL of Receipts This Page (option	al)		126.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 253 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any i	information copied from such Reports and r commercial purposes, other than using the	Statements ma	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
\	IAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	nce Company	/ Federal PAC	
	ull Name (Last, First, Middle Initial)			Date of Receipt
M	Mailing Address 1108 W Goldthread	Circle		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	ity Sioux Falls	State SD	Zip Code 57108-2824	Transaction ID: 20091105152043-23 Amount of Each Receipt this Period
F	EC ID number of contributing ederal political committee.	C		42.00
N S	lame of Employer Self-Employed	Occupatio General	n Insurance Agent	
R	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 882.00	
B. R	ull Name (Last, First, Middle Initial) Robert D Lowrey Mailing Address 1108 W Goldthread (Cirolo		Date of Receipt
_		11 15 2009		
	Sity Sioux Falls	State SD	Zip Code	Transaction ID: 20091118163132-23
F	EC ID number of contributing ederal political committee.	C	57108-2824	Amount of Each Receipt this Period 42.00
N S	lame of Employer Self-Employed	Occupatio General	n Insurance Agent	
R	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 882.00	
	ull Name (Last, First, Middle Initial) Busan A. Lueger			Date of Receipt
_	Mailing Address 4317 N Stowell Aven	ue		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Sity Shorewood	State WI	Zip Code 53211-1748	Transaction ID: 20090720-626-13-0
F	EC ID number of contributing ederal political committee.	C	33211-1740	Amount of Each Receipt this Period 55.00
N N	lame of Employer IML	Occupation VP HR	n	
R	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1155.00	
SUE	BTOTAL of Receipts This Page (optional)			139.00
	TAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 254 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ 4.	Full Name (Last, First, Middle Initial) Susan A. Lueger			Date of Receipt
	Mailing Address 4317 N Stowell Avenu		Zip Code	07 31 2009 2009
	City Shorewood	State WI	53211-1748	Transaction ID: 20090804-626-10-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		55.00
	Name of Employer NML	Occupation VP HR	on	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1155.00	
- В.	Full Name (Last, First, Middle Initial) Susan A. Lueger Mailing Address 4317 N Stowell Avenu			Date of Receipt
				08 15 2009
	City	State	Zip Code	Transaction ID: 20090819-693-14-15
	Shorewood FEC ID number of contributing federal political committee.	C	53211-1748	Amount of Each Receipt this Period 55.00
	Name of Employer NML	Occupation VP HR	on	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1155.00	
- C.	Full Name (Last, First, Middle Initial) Susan A. Lueger			Date of Receipt
	Mailing Address 4317 N Stowell Avenu	ne		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Shorewood	State WI	Zip Code 53211-1748	Transaction ID: 20090902-693-15-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		55.00
	Name of Employer NML	Occupation VP HR	on	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1155.00	
	SUBTOTAL of Receipts This Page (optional)	1		165.00
	TOTAL This Period (last page this line number			

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 255 / 574 (check only one) X
A 0	ny information copied from such Reports and r for commercial purposes, other than using the	Statements mane name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	nce Company	Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Susan A. Lueger			Date of Receipt
	Mailing Address 4317 N Stowell Aven	ue		09 15 7 2009
	City Shorewood	State WI	Zip Code 53211-1748	Transaction ID: 20090921-689-17-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		55.00
	Name of Employer NML	Occupatio VP HR	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1155.00	
— В.	Full Name (Last, First, Middle Initial) Susan A. Lueger Mailing Address 4217 N. Stawell Aven			Date of Receipt
	Mailing Address 4317 N Stowell Aven	ue		09 / 30 / 2009
	City Shorewood	State WI	Zip Code 53211-1748	Transaction ID: 20091008104013-615 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		55.00
	Name of Employer NML	Occupatio VP HR	n	
	Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1155.00	
_ C.	Full Name (Last, First, Middle Initial) Susan A. Lueger			Date of Receipt
	Mailing Address 4317 N Stowell Aven	ue		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Shorewood	State WI	Zip Code 53211-1748	Transaction ID: 20091015164625-614 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33211-1740	55.00
	Name of Employer NML	Occupatio VP HR	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1155.00	
Ţ,	SUBTOTAL of Receipts This Page (optional)	1		165.00
T.	FOTAL This Period (last page this line number	er only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 256 / 574 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	and Statements may not be sold or used by any perso g the name and address of any political committee to urance Company Federal PAC	n for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Susan A. Lueger Mailing Address 4317 N Stowell Av	onuo	Date of Receipt
City Shorewood	State Zip Code WI 53211-1748	1 0 3 1 2 0 0 9 Transaction ID: 20091105152628-614 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Occupation	55.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	VP HR Aggregate Year-to-Date ▼ 1155.00	
Full Name (Last, First, Middle Initial) Susan A. Lueger Mailing Address 4317 N Stowell Av	enue	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 2009111816423-614
Shorewood	WI 53211-1748	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	55.00
Name of Employer NML	Occupation VP HR	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1155.00	
Full Name (Last, First, Middle Initial) Jeffrey J. Lueken		Date of Receipt
Mailing Address 1213 E Goodrich L	Lane	07 15 2009
City	State Zip Code	Transaction ID: 20090720-928-13-0
Fox Point FEC ID number of contributing federal political committee.	WI 53217-2946	Amount of Each Receipt this Period 133.00
Name of Employer NML	Occupation Svp Securities	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3381.00	
SUBTOTAL of Receipts This Page (ontion	al)	243.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 257 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A	Any information copied from such Reports and or for commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	/ Federal PAC	
∠ A.	Full Name (Last, First, Middle Initial) Jeffrey J. Lueken			Date of Receipt
	Mailing Address 1213 E Goodrich Lan	е		07 31 2009
	City Fox Point	State WI	Zip Code 53217-2946	Transaction ID: 20090804-926-10-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00217 2040	133.00
	Name of Employer NML	Occupatio Svp Seci		
	Receipt For: Primary General Other (specify) ▼	- ' 	e Year-to-Date ▼ 3381.00	
— В.	Full Name (Last, First, Middle Initial) Jeffrey J. Lueken			Date of Receipt
	Mailing Address 1213 E Goodrich Lan	e 		08 15 2009
	City Fox Point	State WI	Zip Code 53217-2946	Transaction ID: 20090819-993-14-15
	FEC ID number of contributing federal political committee.	C	33217-2340	Amount of Each Receipt this Period 133.00
	Name of Employer NML	Occupatio Svp Seci		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 3381.00	
_ C.	Full Name (Last, First, Middle Initial) Jeffrey J. Lueken			Date of Receipt
	Mailing Address 1213 E Goodrich Lan	е		08 31 YYYYY 2009
	City Fox Point	State WI	Zip Code 53217-2946	Transaction ID: 20090902-993-15-1
	FEC ID number of contributing federal political committee.	C	55217-2940	Amount of Each Receipt this Period 133.00
	Name of Employer NML	Occupatio Svp Sec		
	Receipt For: Primary General Other (specify) ▼	- ' '	e Year-to-Date ▼ 3381.00	
	SUBTOTAL of Receipts This Page (optional) .			399.00
	SUBTOTAL of Receipts This Page (optional) . TOTAL This Period (last page this line numbe		<u> </u>	399.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	K)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 258/5/4 (check only one)
Any information copied from such Reports are or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	rance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Jeffrey J. Lueken			Date of Receipt
Mailing Address 1213 E Goodrich L	ane		0 9 1 5 2 0 0 9
City Fox Point	State WI	Zip Code 53217-2946	Transaction ID: 20090921-987-17-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		133.00
Name of Employer NML	Occupation Svp Secu		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3381.00	
Full Name (Last, First, Middle Initial) Jeffrey J. Lueken			Date of Receipt
Mailing Address 1213 E Goodrich L	ane		0 9 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Fox Point	State WI	Zip Code 53217-2946	Transaction ID: 20091008104013-91 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		133.00
Name of Employer NML	Occupation Svp Secu		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 3381.00	
Full Name (Last, First, Middle Initial) Jeffrey J. Lueken			Date of Receipt
Mailing Address 1213 E Goodrich L	ane		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Fox Point	State WI	Zip Code 53217-2946	Transaction ID: 20091015164625-9 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33217-2340	133.00
Name of Employer NML	Occupation Svp Secu		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 3381.00	
SUBTOTAL of Receipts This Page (optional			399.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 259 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	ay not be sold or used by any persidress of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ce Company	y Federal PAC	
∠ A .	Full Name (Last, First, Middle Initial) Jeffrey J. Lueken			Date of Receipt
	Mailing Address 1213 E Goodrich Lane	9		10 31 7 2009
	City Fox Point	State WI	Zip Code 53217-2946	Transaction ID: 20091105152628-913 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		133.00
	Name of Employer NML	Occupation Svp Sec		
	Receipt For: Primary General Other (specify) ▼	, ' 	e Year-to-Date ▼ 3381.00	
- В.	Full Name (Last, First, Middle Initial) Jeffrey J. Lueken			Date of Receipt
	Mailing Address 1213 E Goodrich Lane			111 / 15 / 2009
	City Fox Point	State WI	Zip Code 53217-2946	Transaction ID: 2009111816423-913 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		133.00
	Name of Employer NML	Occupation Svp Sec		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 3381.00	
- С.	Full Name (Last, First, Middle Initial) David C. Magoon	1		Date of Receipt
	Mailing Address N31 W23910 Old Fari	m		09 15 2009
	City Pewaukee	State WI	Zip Code 53072	Transaction ID: 20090921-623-17-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33072	20.00
	Name of Employer NML	Occupation IS Cons		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
	SUBTOTAL of Receipts This Page (optional)			286.00
	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 260 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insural	Statements may not be sold or used by any persone name and address of any political committee on the company Federal PAC	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) David C. Magoon Mailing Address N31 W23910 Old Fall City Pewaukee FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53072 C Occupation IS Cons Aggregate Year-to-Date 300.00	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) David C. Magoon Mailing Address N31 W23910 Old Fall City Pewaukee FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53072 C Occupation IS Cons Aggregate Year-to-Date 300.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) David C. Magoon Mailing Address N31 W23910 Old Fall City Pewaukee FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53072 C Occupation IS Cons Aggregate Year-to-Date 300.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		60.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 261 / 574 (check only one) X
7	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and add	ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
/	The Northwestern Mutual Life Insurar	ce Company	rederal PAC	
۹.	Full Name (Last, First, Middle Initial) David C. Magoon Mailing Address Not Magoda Cld Fau			Date of Receipt
	Mailing Address N31 W23910 Old Far		7'- 0-4-	11 1 15 2009
	City Pewaukee	State WI	Zip Code 53072	Transaction ID: 2009111816423-549 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer NML	Occupation IS Cons	1	
	Receipt For: Primary General Other (specify) ▼	++	Year-to-Date ▼ 300.00	
_ 3.	Full Name (Last, First, Middle Initial) Jean M. Maier			Date of Receipt
	Mailing Address 5432 N Diversey			07 15 2009
	City	State	Zip Code	Transaction ID: 20090720-548-13-0
	Whitefish Bay FEC ID number of contributing federal political committee.	C	53217-5165	Amount of Each Receipt this Period
	Name of Employer NML	Occupation Syp Ent C	Dps & Cco	7
	Receipt For: Primary General Other (specify) ▼	- 	Year-to-Date ▼ 3150.00	
_ ;.	Full Name (Last, First, Middle Initial) Jean M. Maier			Date of Receipt
-	Mailing Address 5432 N Diversey			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Whitefish Bay	State WI	Zip Code 53217-5165	Transaction ID: 20090804-548-10-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		150.00
	Name of Employer NML	Occupation Svp Ent (Dps & Cco	
	Receipt For: Primary General Other (specify) ▼	, ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	Year-to-Date ▼ 3150.00	
	SUBTOTAL of Receipts This Page (optional) .	1		320.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 262/5/4 (check only one) X 11a
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	ance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Jean M. Maier			Date of Receipt
Mailing Address 5432 N Diversey			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Whitefish Bay	State WI	Zip Code 53217-5165	Transaction ID: 20090819-616-14-15 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		150.00
Name of Employer NML	Occupatio Svp Ent	n Ops & Cco	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3150.00	
Full Name (Last, First, Middle Initial) Jean M. Maier			Date of Receipt
Mailing Address 5432 N Diversey			0 8 3 1 2 0 0 9
City Whitefish Bay	State WI	Zip Code 53217-5165	Transaction ID: 20090902-616-15-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33217-3103	150.00
Name of Employer NML	Occupatio	n Ops & Cco	7
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 3150.00	
Full Name (Last, First, Middle Initial) Jean M. Maier			Date of Receipt
Mailing Address 5432 N Diversey			0 9 1 5 2 0 0 9
City Whitefish Bay	State WI	Zip Code 53217-5165	Transaction ID: 20090921-614-17-1
FEC ID number of contributing federal political committee.	C	33217-3103	Amount of Each Receipt this Period 150.00
Name of Employer NML	Occupatio Svp Ent	n Ops & Cco	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 3150.00	
SUBTOTAL of Receipts This Page (optiona	<u> </u>		450.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 263 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and add	dress of any political committee to	on for the purpose of soliciting contributions
The Northwestern Mutual Life Insuran	ice Company	Federal PAC	
Full Name (Last, First, Middle Initial) Jean M. Maier			Date of Receipt
Mailing Address 5432 N Diversey			09 30 2009
City	State	Zip Code	Transaction ID: 20091008104013-54
Whitefish Bay	WI	53217-5165	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		150.00
Name of Employer NML	Occupatio Svp Ent	n Ops & Cco	
Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	3150.00	
Full Name (Last, First, Middle Initial) Jean M. Maier			Date of Receipt
Mailing Address 5432 N Diversey			M M / D D / Y Y Y Y Y Y 1 1 5 2 0 0 9
City	State	Zip Code	Transaction ID: 20091015164625-53
Whitefish Bay	WI	53217-5165	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		150.00
Name of Employer NML	Occupatio Svp Ent	n Ops & Cco	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		3150.00	
Full Name (Last, First, Middle Initial) Jean M. Maier			Date of Receipt
Mailing Address 5432 N Diversey			10 31 2009
City	State	Zip Code	Transaction ID: 20091105152628-53
Whitefish Bay	WI	53217-5165	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		150.00
Name of Employer NML	Occupatio Svp Ent	n Ops & Cco	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 3150.00	
SUBTOTAL of Receipts This Page (optional)			450.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 264 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports or for commercial purposes, other than use NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	and Statements may not be sold or used by any persing the name and address of any political committee to surance Company Federal PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Jean M. Maier		Date of Receipt
Mailing Address 5432 N Diversey		11 1 15 2009
City Whitefish Bay	State Zip Code WI 53217-5165	Transaction ID: 2009111816423-540 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer NML	Occupation Svp Ent Ops & Cco	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3150.00	
Full Name (Last, First, Middle Initial) Raymond J. Manista Mailing Address 7006 N. Crasswa		Date of Receipt
Mailing Address 7236 N Crosswa	y	07 15 2009
City	State Zip Code WI 53217-3519	Transaction ID: 20090720-584-13-0
Fox Point FEC ID number of contributing federal political committee.	WI 53217-3519	Amount of Each Receipt this Period 70.00
Name of Employer NML	Occupation Gen Cnsl & Sec	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1410.00	
Full Name (Last, First, Middle Initial) Raymond J. Manista		Date of Receipt
Mailing Address 7236 N Crosswa	У	07 31 2009
City	State Zip Code	Transaction ID: 20090804-584-10-0
Fox Point	WI 53217-3519	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	70.00
Name of Employer NML	Occupation Gen Cnsl & Sec	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1410.00	
SUBTOTAL of Receipts This Page (opti	onal)	290.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 265 / 574 (check only one) X
A o	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
. <u>/</u>	Full Name (Last, First, Middle Initial) Raymond J. Manista			Date of Receipt
	Mailing Address 7236 N Crossway			08 / 15 / 2009
	City Fox Point	State WI	Zip Code 53217-3519	Transaction ID: 20090819-652-14-15 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		70.00
	Name of Employer NML	Occupatio Gen Cns		
	Receipt For: Primary General Other (specify)	, '	e Year-to-Date ▼ 1410.00	
3.	Full Name (Last, First, Middle Initial) Raymond J. Manista Mailing Address 7236 N Crossway	1		Date of Receipt
	City	State	Zip Code	0 8 3 1 2 0 0 9 Transaction ID: 20090902-652-15-1
	Fox Point	WI	53217-3519	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		70.00
	Name of Employer NML	Occupatio Gen Cns		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1410.00	
_	Full Name (Last, First, Middle Initial) Raymond J. Manista			Date of Receipt
	Mailing Address 7236 N Crossway			09 15 2009
	City	State	Zip Code	Transaction ID: 20090921-650-17-1
	Fox Point FEC ID number of contributing federal political committee.	C	53217-3519	Amount of Each Receipt this Period 70.00
	Name of Employer NML	Occupatio Gen Cns		
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 1410.00	
ſ,	SUBTOTAL of Receipts This Page (optional)			210.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 266 / 574 (check only one) X 11a
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	/ Federal PAC	
∠ A .	Full Name (Last, First, Middle Initial) Raymond J. Manista			Date of Receipt
	Mailing Address 7236 N Crossway			09 30 2009
	City Fox Point	State WI	Zip Code 53217-3519	Transaction ID: 20091008104013-576 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		70.00
	Name of Employer NML	Occupatio Gen Cns		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1410.00	
- В.	Full Name (Last, First, Middle Initial) Raymond J. Manista			Date of Receipt
	Mailing Address 7236 N Crossway			10 15 2009
	City Fox Point	State WI	Zip Code 53217-3519	Transaction ID: 20091015164625-575 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33217-3319	70.00
	Name of Employer NML	Occupation Gen Cns		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1410.00	
- С.	Full Name (Last, First, Middle Initial) Raymond J. Manista	Date of Receipt		
	Mailing Address 7236 N Crossway			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20091105152628-575
	Fox Point FEC ID number of contributing federal political committee.	C	53217-3519	Amount of Each Receipt this Period 70.00
	Name of Employer NML	Occupatio Gen Cns		
	Receipt For: Primary General Other (specify) ▼	- '	e Year-to-Date ▼ 1410.00	
	SUBTOTAL of Receipts This Page (optional) .	1		210.00
	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for	e separate schedule(s) each category of the tailed Summary Page	FOR LINE NUMBER: PAGE 267 / 574 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	e name and address o	of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Raymond J. Manista Mailing Address 7236 N Crossway			Date of Receipt 1 1 1 5 2 0 0 9
City Fox Point FEC ID number of contributing federal political committee.		ip Code 33217-3519	Transaction ID: 2009111816423-576 Amount of Each Receipt this Period 70.00
Name of Employer NML Receipt For: Primary General Other (specify)	Occupation Gen Cnsl & Se Aggregate Year-		
Full Name (Last, First, Middle Initial) Jeffrey S. Marks Mailing Address 8232 S Country Club	1		Date of Receipt 1 0 1 5 2 0 0 9
City Franklin FEC ID number of contributing federal political committee.		ip Code 33132-8532	Transaction ID: 20091015164625-593 Amount of Each Receipt this Period 11.00
Name of Employer NML Receipt For: Primary General	Occupation Dir Spcl Proj Aggregate Year-	to-Date ▼	
Other (specify) ▼ Full Name (Last, First, Middle Initial) Jeffrey S. Marks Mailing Address 8232 S Country Club	0 0 0		Date of Receipt
City Franklin FEC ID number of contributing federal political committee.		ip Code i3132-8532	Transaction ID: 20091105152628-593 Amount of Each Receipt this Period 11.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation Dir Spcl Proj Aggregate Year-	to-Date ▼ 231.00	
SUBTOTAL of Receipts This Page (optional) .			92.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 268 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not be sold or used by any perso the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	ance Company Federal PAC	
Full Name (Last, First, Middle Initial) Jeffrey S. Marks		Date of Receipt
Mailing Address 8232 S Country Clu	b	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 2009111816423-594
<u>Franklin</u>	WI 53132-8532	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	11.00
Name of Employer NML	Occupation Dir Spcl Proj	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 231.00	
Full Name (Last, First, Middle Initial) Meridee J. Maynard		Date of Receipt
Mailing Address 809 E Lake Forest		07 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20090720-853-13-0
Whitefish Bay	WI 53217-5377	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.00
Name of Employer NML	Occupation Svp	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1983.00	
Full Name (Last, First, Middle Initial) Meridee J. Maynard		Date of Receipt
Mailing Address 809 E Lake Forest		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20090804-852-10-0
Whitefish Bay	WI 53217-5377	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.00
Name of Employer NML	Occupation Svp	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1983.00	
		177.00
SUBTOTAL of Receipts This Page (optional)	177.00
TOTAL This Period (last page this line numl	per only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 269 / 5/4 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	rance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Meridee J. Maynard			Date of Receipt
Mailing Address 809 E Lake Forest			08 15 2009
City Whitefish Bay	State WI	Zip Code 53217-5377	Transaction ID: 20090819-919-14-15 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		83.00
Name of Employer NML	Occupatio Svp	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1983.00	
Full Name (Last, First, Middle Initial) Meridee J. Maynard	I		Date of Receipt
Mailing Address 809 E Lake Forest			08 31 7 2009
City Whitefish Bay	State WI	Zip Code 53217-5377	Transaction ID: 20090902-919-15-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00217 0077	83.00
Name of Employer NML	Occupatio Svp	n	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1983.00	
Full Name (Last, First, Middle Initial) Meridee J. Maynard			Date of Receipt
Mailing Address 809 E Lake Forest			09 15 2009
City Whitefish Bay	State WI	Zip Code 53217-5377	Transaction ID: 20090921-914-17-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00217 0077	83.00
Name of Employer NML	Occupatio Svp	n	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1983.00	
SUBTOTAL of Receipts This Page (optional	al)		249.00

Any information copied from such Reports and Statements may not be sold or used by any persor of for commercial purposes, other than using the name and address of any political committee to sold or commercial purposes, other than using the name and address of any political committee to sold or commercial purposes, other than using the name and address of any political committee to sold or committee to sold or committee to sold or committee. A. Full Name (Last, First, Middle Initial) Meridee J. Maynard Mailing Address 809 E Lake Forest City State Zip Code WI 53217-5377 FEC ID number of contributing federal political committee. Name of Employer State State Sip Code Wiles (Syp State	FOR LINE NUMBER: PAGE 270 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A. Full Name (Last, First, Middle Initial) Meridee J. Maynard Mailing Address 809 E Lake Forest City State Zip Code Whitefish Bay WI 53217-5377 FEC ID number of contributing federal political committee. Name of Employer NML Primary General Other (specify) ▼ 1983.00 Full Name (Last, First, Middle Initial) Meridee J. Maynard Mailing Address 809 E Lake Forest City State Zip Code Whitefish Bay WI 53217-5377 FEC ID number of contributing federal political committee. Name of Employer NML Name of Employer NML Receipt For: Primary General Other (specify) ▼ 1983.00 Full Name (Last, First, Middle Initial) Receipt For: Primary General Other (specify) ▼ 1983.00 C. Meridee J. Maynard Mailing Address 809 E Lake Forest City State Zip Code Whitefish Bay 1983.00 Full Name (Last, First, Middle Initial) Meridee J. Maynard Mailing Address 809 E Lake Forest City State Zip Code Whitefish Bay WI 53217-5377 FEC ID number of contributing federal political committee. C State Zip Code Whitefish Bay WI 53217-5377 FEC ID number of contributing federal political committee. Name of Employer NML Name of Employer NML Name of Employer Occupation Svp	for the purpose of soliciting contributions olicit contributions from such committee.
Mailing Address 809 E Lake Forest City State Zip Code Whitefish Bay WI 53217-5377 FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ 1983.00 Full Name (Last, First, Middle Initial) Meridee J. Maynard Mailing Address 809 E Lake Forest City State Zip Code Whitefish Bay WI 53217-5377 FEC ID number of contributing federal political committee. Name of Employer NML Name of Employer NML Receipt For: Occupation Svp Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1983.00 C. Lity State Zip Code WI 53217-5377 FEC ID number of contributing federal political committee. Name of Employer NML Primary General Other (specify) ▼ 1983.00 Full Name (Last, First, Middle Initial) Meridee J. Maynard Mailing Address 809 E Lake Forest City State Zip Code Whitefish Bay WI 53217-5377 FEC ID number of contributing federal political committee. C. Name of Employer NML Name of Employer Occupation Svp PEC ID number of contributing federal political committee. Name of Employer NML Name of Employer Occupation Svp	
City Whitefish Bay State Zip Code WI 53217-5377 FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Meridee J. Maynard Mailing Address 809 E Lake Forest City State Zip Code WI 53217-5377 FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Cccupation Svp Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Meridee J. Maynard Mailing Address 809 E Lake Forest City State Zip Code Whitefish Bay Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Meridee J. Maynard Mailing Address 809 E Lake Forest City State Zip Code Whitefish Bay WI 53217-5377 FEC ID number of contributing federal political committee. Cc. Name of Employer NML Cc. Cccupation Syp	Date of Receipt
Whitefish Bay WI 53217-5377 FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Meridee J. Maynard Mailing Address 809 E Lake Forest City State Zip Code Whitefish Bay WI 53217-5377 FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Meridee J. Maynard Mailing Address 809 E Lake Forest C: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Meridee J. Maynard Mailing Address 809 E Lake Forest City State Zip Code Whitefish Bay Tip Code Whitefish Bay State Zip Code Whitefish Bay WI 53217-5377 FEC ID number of contributing federal political committee. C: Name of Employer NML	09 30 2009
FEC ID number of contributing federal political committee. Name of Employer NML Receipt For:	Transaction ID: 20091008104013-841 Amount of Each Receipt this Period
Receipt For: Primary	83.00
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Meridee J. Maynard Mailing Address 809 E Lake Forest City State Zip Code Whitefish Bay WI 53217-5377 FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Occupation Svp Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ I 1983.00 Full Name (Last, First, Middle Initial) Meridee J. Maynard Mailing Address 809 E Lake Forest City State Zip Code Whitefish Bay WI 53217-5377 FEC ID number of contributing federal political committee. Name of Employer NML Name of Employer NML Occupation Svp	1
Mailing Address 809 E Lake Forest City State Zip Code Whitefish Bay WI 53217-5377 FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Meridee J. Maynard Mailing Address 809 E Lake Forest City State Zip Code Whitefish Bay WI 53217-5377 FEC ID number of contributing federal political committee. Name of Employer NML Cc. Name of Employer Occupation Svp	-
City State Zip Code Whitefish Bay WI 53217-5377 FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Meridee J. Maynard Mailing Address 809 E Lake Forest City State Zip Code Whitefish Bay WI 53217-5377 FEC ID number of contributing federal political committee. Name of Employer NML Name of Employer NML C. State Zip Code WI 53217-5377	Date of Receipt
Whitefish Bay WI 53217-5377 FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Meridee J. Maynard Mailing Address 809 E Lake Forest City Whitefish Bay WI 53217-5377 FEC ID number of contributing federal political committee. Name of Employer NML Name of Employer NML Occupation Svp	10 15 2009
FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Meridee J. Maynard Mailing Address 809 E Lake Forest City State Zip Code Whitefish Bay WI 53217-5377 FEC ID number of contributing federal political committee. Name of Employer NML Name of Employer NML Occupation Svp	Transaction ID: 20091015164625-840
Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Meridee J. Maynard Mailing Address 809 E Lake Forest City State Wind State Vip Code Whitefish Bay Wind State Vip Code Wind State Vip Code Wind State Vip Code Wind State Vip Code Vin State Vip Code Vip State Vip State Vip Code Vip State	Amount of Each Receipt this Period 83.00
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Meridee J. Maynard Mailing Address 809 E Lake Forest City State Zip Code Whitefish Bay WI 53217-5377 FEC ID number of contributing federal political committee. Name of Employer NML Occupation Svp	1
Meridee J. Maynard Mailing Address 809 E Lake Forest City State Zip Code Whitefish Bay WI 53217-5377 FEC ID number of contributing federal political committee. Name of Employer NML Occupation Svp	
Mailing Address 809 E Lake Forest City State Zip Code Whitefish Bay WI 53217-5377 FEC ID number of contributing federal political committee. Name of Employer NML Occupation Svp	Date of Receipt
Whitefish Bay WI 53217-5377 FEC ID number of contributing federal political committee. Name of Employer NML Occupation Svp	10 31 2009
FEC ID number of contributing federal political committee. Name of Employer NML Occupation Svp	Transaction ID: 20091105152628-840 Amount of Each Receipt this Period
σνρ	83.00
	-
Primary General Other (specify) ▼ 1983.00	
SUBTOTAL of Receipts This Page (optional)	249.00

Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) David C Mc Avoy Mailing Address 11 Mountview Road City State Wellesley MA FEC ID number of contributing federal political committee. Name of Employer Self-Employed Occup	address of any political committee any Federal PAC Zip Code 53217-5377	Date of Receipt Transaction ID: 2009111816423-840 Amount of Each Receipt 83.00 Date of Receipt 83.00 Transaction ID: 20090720-1190-13-1 Amount of Each Receipt this Period 200.00
Meridee J. Maynard Mailing Address 809 E Lake Forest City State Whitefish Bay WI FEC ID number of contributing federal political committee. Name of Employer NML Svp Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) David C Mc Avoy Mailing Address 11 Mountview Road City State Wellesley MA FEC ID number of contributing federal political committee. Name of Employer Self-Employed General Other (specify) ▼ Full Name (Last, First, Middle Initial) David C Mc Avoy Mailing Address 11 Mountview Road Full Name (Last, First, Middle Initial) David C Mc Avoy Mailing Address 11 Mountview Road City State Wellesley For: Full Name (Last, First, Middle Initial) David C Mc Avoy Mailing Address 11 Mountview Road	53217-5377 attion ate Year-to-Date ▼ 1983.00 Zip Code	Transaction ID: 2009111816423-840 Amount of Each Receipt this Period Date of Receipt
Receipt For: Primary	ate Year-to-Date ▼ 1983.00 Zip Code	Transaction ID: 20090720-1190-13-1 Amount of Each Receipt this Period
David C Mc Avoy Mailing Address 11 Mountview Road City State Wellesley MA FEC ID number of contributing federal political committee. Name of Employer Self-Employed General Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) David C Mc Avoy Mailing Address 11 Mountview Road City State Wellesley MA FEC ID number of contributing	•	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Wellesley FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) David C Mc Avoy Mailing Address 11 Mountview Road City State Wellesley FEC ID number of contributing	•	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) David C Mc Avoy Mailing Address 11 Mountview Road City State Wellesley FEC ID number of contributing	02481-2/5/	
Self-Employed Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) David C Mc Avoy Mailing Address 11 Mountview Road City Wellesley FEC ID number of contributing	#:	\dashv
David C Mc Avoy Mailing Address 11 Mountview Road City State Wellesley MA FEC ID number of contributing	al Insurance Agent ate Year-to-Date ▼ 4200.00	
City State Wellesley MA FEC ID number of contributing		Date of Receipt
Wellesley MA FEC ID number of contributing		07 31 7 2009
FEC ID number of contributing	Zip Code 02481-2757	Transaction ID: 20090804-1188-10-0
Toda a pontoa dominico	02-01-2701	Amount of Each Receipt this Period 200.00
Name of Employer Self-Employed Gene	ation al Insurance Agent	
		
SUBTOTAL of Receipts This Page (optional)	ate Year-to-Date ▼ 4200.00	

SCHEDULE A (FEC Form	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 272 / 574 (check only one) X
NAME OF COMMITTEE (In Full)	orts and Statements may not be sold or used by any person using the name and address of any political committee to Insurance Company Federal PAC	
Full Name (Last, First, Middle Initia David C Mc Avoy Mailing Address 11 Mountview		Date of Receipt 0 8 1 5 2 0 0 9
City Wellesley	State Zip Code MA 02481-2757	Transaction ID: 20090819-13-14-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	200.00
Self-Employed Receipt For: Primary General Other (specify) ▼	General Insurance Agent Aggregate Year-to-Date ▼ 4200.00	
Full Name (Last, First, Middle Initia David C Mc Avoy Mailing Address 11 Mountview	,	Date of Receipt 0 8 3 1 2 0 0 9
City	State Zip Code	Transaction ID: 20090902-13-14-46
Wellesley	MA 02481-2757	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4200.00	
Full Name (Last, First, Middle Initia David C Mc Avoy)	Date of Receipt
Mailing Address 11 Mountview		09 / 15 / Y Y Y Y Y
City Wellesley	State Zip Code MA 02481-2757	Transaction ID: 20090921-13-16-16 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4200.00	
SUBTOTAL of Receipts This Page (optional)	600.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 273 / 574 (check only one) X
,	Any information copied from such Reports and or for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any personess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insural	nce Company	Federal PAC	
	Full Name (Last, First, Middle Initial) David C Mc Avoy			Date of Receipt
	Mailing Address 11 Mountview Road			09 30 2009
	City Wellesley	State MA	Zip Code 02481-2757	Transaction ID: 20091008103448-13 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		200.00
	Name of Employer Self-Employed	Occupation General Ir	nsurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4200.00	
_	Full Name (Last, First, Middle Initial) David C Mc Avoy			Date of Receipt
	Mailing Address 11 Mountview Road			10 15 2009
	City	State	Zip Code	Transaction ID: 2009102293957-13
	Wellesley	MA	02481-2757	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		200.00
	Name of Employer Self-Employed	Occupation General Ir	nsurance Agent	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	4200.00	
_	Full Name (Last, First, Middle Initial) David C Mc Avoy			Date of Receipt
	Mailing Address 11 Mountview Road	10 31 2009		
	City Wellesley	State MA	Zip Code	Transaction ID: 20091105152043-13
	FEC ID number of contributing federal political committee.	C	02481-2757	Amount of Each Receipt this Period 200.00
	Name of Employer Self-Employed	Occupation General Ir	nsurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4200.00	
	SUBTOTAL of Receipts This Page (optional)			600.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 274 / 574 (check only one) X		
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
_	Full Name (Last, First, Middle Initial)	ce Company	y redelal rac			
Α.	David C Mc Avoy Mailing Address 11 Mountview Road			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y		
	City Wellesley	State MA	Zip Code 02481-2757	Transaction ID: 20091118163132-13 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		200.00		
	Name of Employer Self-Employed	Occupation General	on Insurance Agent			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4200.00			
В.	Full Name (Last, First, Middle Initial) Roger M Mc Queen Mailing Address 6098 Pioneer Fork Ro	ad		Date of Receipt		
	City	State	Zip Code	0 7 1 5 2 0 0 9 Transaction ID: 20090720-1187-13-1		
	Salt Lake Cty FEC ID number of contributing	C	84108-3613	Amount of Each Receipt this Period		
	federal political committee. Name of Employer McQueen Fncl Group Inc	Occupation				
	Receipt For: Primary General Other (specify) ▼	Special Aggregate	e Year-to-Date ▼ 2625.00			
- C.	Full Name (Last, First, Middle Initial) Roger M Mc Queen			Date of Receipt		
	Mailing Address 6098 Pioneer Fork Ro					
	City Salt Lake Cty	State UT	Zip Code 84108-3613	Transaction ID: 20090804-1185-10-0 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		125.00		
	Name of Employer McQueen Fncl Group Inc	Occupation Special /				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2625.00			
	SUBTOTAL of Receipts This Page (optional)			450.00		
Ī	TOTAL This Period (last page this line number	only)				

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule for each category of the Detailed Summary Pag	(Check only one)
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura		y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
7 The Northwestern Mutual Life insura	ince company rederal PAC	
Full Name (Last, First, Middle Initial) Roger M Mc Queen Mailing Address 6098 Pioneer Fork F	lood	Date of Receipt
	loau	08 15 2009
City	State Zip Code	Transaction ID: 20090819-10-14-0
Salt Lake Cty	UT 84108-3613	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer McQueen Fncl Group Inc	Occupation Special Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2625.0	0
Full Name (Last, First, Middle Initial) Roger M Mc Queen		Date of Receipt
Mailing Address 6098 Pioneer Fork F	Road	08 31 7 2009
City	State Zip Code	Transaction ID: 20090902-10-14-46
Salt Lake Cty	UT 84108-3613	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer McQueen Fncl Group Inc	Occupation Special Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2625.0	0
Full Name (Last, First, Middle Initial) Roger M Mc Queen	l	Date of Receipt
Mailing Address 6098 Pioneer Fork F	load	0 9 1 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20090921-10-16-16
Salt Lake Cty	UT 84108-3613	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer McQueen Fncl Group Inc	Occupation Special Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2625.0	0
CURTOTAL of Describe This Dans (autional)		375.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 276 / 574 (check only one) X
4	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma ne name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	nce Company	/ Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Roger M Mc Queen			Date of Receipt
	Mailing Address 6098 Pioneer Fork R	oad		09 / 30 / 2009
	City Salt Lake Cty	State UT	Zip Code 84108-3613	Transaction ID: 20091008103448-10 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	04100-3013	125.00
	Name of Employer McQueen Fncl Group Inc	Occupation Special /		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2625.00	
— В.	Full Name (Last, First, Middle Initial) Roger M Mc Queen			Date of Receipt
	Mailing Address 6098 Pioneer Fork R	oad		10 15 2009
	City	State	Zip Code	Transaction ID: 2009102293957-10
	Salt Lake Cty FEC ID number of contributing federal political committee.	C	84108-3613	Amount of Each Receipt this Period 125.00
	Name of Employer McQueen Fncl Group Inc	Occupation Special /		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2625.00	
_ C.	Full Name (Last, First, Middle Initial) Roger M Mc Queen			Date of Receipt
	Mailing Address 6098 Pioneer Fork R	10 31 YYYYY 2009		
	City Salt Lake Cty	State UT	Zip Code 84108-3613	Transaction ID: 20091105152043-10
	FEC ID number of contributing federal political committee.	C	04100-3013	Amount of Each Receipt this Period 125.00
	Name of Employer McQueen Fncl Group Inc	Occupation Special /		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2625.00	
	SUBTOTAL of Receipts This Page (optional)			375.00
	TOTAL This Period (last page this line number	er only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 277 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17		
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	/ Federal PAC			
Α.	Full Name (Last, First, Middle Initial) Roger M Mc Queen			Date of Receipt		
	Mailing Address 6098 Pioneer Fork Ro	ad		11 15 2009		
	City <u>Salt Lake Cty</u>	State UT	Zip Code 84108-3613	Transaction ID: 20091118163132-10 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		125.00		
	Name of Employer McQueen Fncl Group Inc	Occupation Special /				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2625.00			
- В.	Full Name (Last, First, Middle Initial) Brian W McClure					
	Mailing Address 1402 Wyndemere Poi	Mailing Address 1402 Wyndemere Point Drive				
	City Champaign	State IL	Zip Code 61822-3349	Transaction ID: 20091118163132-71		
	FEC ID number of contributing federal political committee.	C	01022-3349	Amount of Each Receipt this Period 42.00		
	Name of Employer McClure Fncl Group Inc	Occupation Special /				
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 210.00			
с.	Full Name (Last, First, Middle Initial) Erin L. McComas			Date of Receipt		
	Mailing Address 1485 Broadstone Place	се		08 31 YYYYY 2009		
	City Vienna	State VA	Zip Code 22182-1752	Transaction ID: 20090902-1206-15-1 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		13.00		
	Name of Employer NML	Occupation Director-	n Field Asset Mgmt			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 273.00			
	SUBTOTAL of Receipts This Page (optional) .			180.00		
	TOTAL This Period (last page this line number		<u> </u>			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 278 / 574 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance of the Name of States	e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Erin L. McComas Mailing Address 1485 Broadstone Place City Vienna FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General	State Zip Code VA 22182-1752 C Occupation Director-Field Asset Mgmt Aggregate Year-to-Date 273.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Erin L. McComas Mailing Address 1485 Broadstone Place City Vienna FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼		Date of Receipt M M D D Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Erin L. McComas Mailing Address 1485 Broadstone Place City Vienna FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code VA 22182-1752 C Occupation Director-Field Asset Mgmt Aggregate Year-to-Date 273.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .	<u> </u>	39.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 279 / 574 (check only one) X 11a
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	ne name and add	dress of any political committee to	on for the purpose of soliciting contributions
∠ 4.	Full Name (Last, First, Middle Initial) Erin L. McComas Mailing Address 1485 Broadstone Place	ce		Date of Receipt
	City Vienna	State VA	Zip Code 22182-1752	1 0 3 1 2 0 0 9 Transaction ID: 20091105152628-1120 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		13.00
	Name of Employer NML Receipt For: Primary General Other (specify) ▼		n Field Asset Mgmt 9 Year-to-Date ▼ 273.00	
 3.	Full Name (Last, First, Middle Initial) Erin L. McComas Mailing Address 1485 Broadstone Place	ce		Date of Receipt 1 1 1 1 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 2009111816423-1119
	Vienna FEC ID number of contributing federal political committee.	C	22182-1752	Amount of Each Receipt this Period
	Name of Employer NML		Field Asset Mgmt	
	Receipt For: Primary General Other (specify) ♥	Aggregate	Year-to-Date ▼ 273.00	
- ;.	Full Name (Last, First, Middle Initial) James L. McFarland Mailing Address 215 N Aberdeen Street	et		Date of Receipt 1 0 1 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 20091015164625-1028
	Chicago FEC ID number of contributing federal political committee.	C	60607-1615	Amount of Each Receipt this Period
	Name of Employer NML	Occupation Asst Gc 8	n & Asst Sec	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 237.00	
	SUBTOTAL of Receipts This Page (optional)	1		39.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 280 / 5 / 4 (check only one)
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may g the name and add	not be sold or used by any personess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	urance Company	Federal PAC	
Full Name (Last, First, Middle Initial) James L. McFarland			Date of Receipt
Mailing Address 215 N Aberdeen S	Street		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Chicago	State IL	Zip Code 60607-1615	Transaction ID: 20091105152628-10 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		13.00
Name of Employer NML	Occupation Asst Gc 8	Asst Sec	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 237.00	
Full Name (Last, First, Middle Initial) James L. McFarland			Date of Receipt
Mailing Address 215 N Aberdeen S	1 1 1 5 2 0 0 9		
City Chicago	State IL	Zip Code 60607-1615	Transaction ID: 2009111816423-102 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		13.00
Name of Employer NML	Occupation Asst Gc 8		
Receipt For: Primary General Other (specify) ▼	· · ·	Year-to-Date ▼ 237.00	
Full Name (Last, First, Middle Initial) Mark J. McLennon			Date of Receipt
Mailing Address 2571 N 86th Stree	t		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Wauwatosa	State WI	Zip Code 53226-1921	Transaction ID: 20090720-622-13-0
FEC ID number of contributing federal political committee.	C	33220-1321	Amount of Each Receipt this Period 23.00
Name of Employer NML	Occupation VP Inv Ac		
Receipt For: Primary General Other (specify) ▼	- t - t	Year-to-Date ▼ 627.00	
SUBTOTAL of Receipts This Page (option	l nal)		49.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 281 / 574 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	Statements may not be sold or used by any pers e name and address of any political committee to nce Company Federal PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mark J. McLennon Mailing Address 2571 N 86th Street City Wauwatosa FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53226-1921 C Occupation VP Inv Adv Svc Aggregate Year-to-Date 627.00	Date of Receipt M M M J 2 0 0 9 Transaction ID: 20090804-622-10-0 Amount of Each Receipt this Period 23.00
Full Name (Last, First, Middle Initial) Mark J. McLennon Mailing Address 2571 N 86th Street City Wauwatosa FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53226-1921 C Occupation VP Inv Adv Svc Aggregate Year-to-Date ▼ 627.00	Date of Receipt M M D D 2 0 0 9
Full Name (Last, First, Middle Initial) Mark J. McLennon Mailing Address 2571 N 86th Street City Wauwatosa FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53226-1921 C Occupation VP Inv Adv Svc Aggregate Year-to-Date ▼ 627.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	· 	69.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 282 / 574 (check only one) X 11a
_	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insuran	nce Company	Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Mark J. McLennon Mailing Address 0574 N. 90th Careat			Date of Receipt
	Mailing Address 2571 N 86th Street City	State	Zip Code	0 9 1 5 2 0 0 9 Transaction ID: 20090921-685-17-1
	Wauwatosa	WI	53226-1921	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		23.00
	Name of Employer NML	Occupation VP Inv A		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		627.00	
В.	Full Name (Last, First, Middle Initial) Mark J. McLennon	Date of Receipt		
	Mailing Address 2571 N 86th Street	09 30 2009		
	City	State	Zip Code	Transaction ID: 20091008104013-611
	Wauwatosa	WI	53226-1921	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		23.00
	Name of Employer NML	Occupation VP Inv A		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	627.00	
с.	Full Name (Last, First, Middle Initial) Mark J. McLennon	•		Date of Receipt
	Mailing Address 2571 N 86th Street			10 15 2009
	City Wauwatosa	State WI	Zip Code 53226-1921	Transaction ID: 20091015164625-610 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		23.00
	Name of Employer NML	Occupation VP Inv A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 627.00	
	SUBTOTAL of Receipts This Page (optional) .			69.00
	TOTAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 283 / 574 (check only one) X 11a
	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insurar	ice Company	/ Federal PAC	
A.	Full Name (Last, First, Middle Initial) Mark J. McLennon Mailing Address 2571 N 86th Street			Date of Receipt
	City	State	Zip Code	1 0 3 1 2 0 0 9 Transaction ID: 20091105152628-610
	Wauwatosa	WI	53226-1921	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		23.00
	Name of Employer NML	Occupation VP Inv A		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 627.00	
В.	Full Name (Last, First, Middle Initial) Mark J. McLennon			Date of Receipt
	Mailing Address 2571 N 86th Street	1 1 1 5 2 0 0 9		
	City	State	Zip Code	Transaction ID: 2009111816423-611
	Wauwatosa FEC ID number of contributing federal political committee.	C	53226-1921	Amount of Each Receipt this Period 23.00
	Name of Employer NML	Occupation VP Inv A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 627.00	
С.	Full Name (Last, First, Middle Initial) Lesli H. McLinden			Date of Receipt
	Mailing Address 340 N Elmridge Aven	ue		10 15 2009
	City Brookfield	State WI	Zip Code 53005-6117	Transaction ID: 20091015164625-1087 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		11.00
	Name of Employer NML	Occupation Asst Gc	on & Asst Sec	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 231.00	
	SUBTOTAL of Receipts This Page (optional) .	1		57.00
	TOTAL This Period (last page this line number	r only)		

SCHEDULE A (FEC Form	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 284 / 574 (check only one) X
or for commercial purposes, other than NAME OF COMMITTEE (In Full)	orts and Statements may not be sold or used by any perso using the name and address of any political committee to	n for the purpose of soliciting contributions
	Insurance Company Federal PAC	
Full Name (Last, First, Middle Initial) Lesli H. McLinden		Date of Receipt
Mailing Address 340 N Elmridg	10 31 2009	
City <u>Brookfield</u>	State Zip Code WI 53005-6117	Transaction ID: 20091105152628-10 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	11.00
Name of Employer NML	Occupation Asst Gc & Asst Sec	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 231.00	
Full Name (Last, First, Middle Initial) Lesli H. McLinden		Date of Receipt
Mailing Address 340 N Elmridg	M M / D D / Y Y Y Y Y Y 1 1 1 1 5 2 0 0 9	
City	State Zip Code	Transaction ID: 2009111816423-108
Brookfield FEC ID number of contributing federal political committee.	WI 53005-6117	Amount of Each Receipt this Period
Name of Employer NML	Occupation Asst Gc & Asst Sec	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 231.00	
Full Name (Last, First, Middle Initial) John W McTigue		Date of Receipt
Mailing Address 205 E 4th Stre	et	M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Hinsdale	State Zip Code IL 60521-4603	Transaction ID: 20090720-1194-13- Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	208.00
Name of Employer McTigue Fncl Group Inc	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4368.00	
	l	230.00

SCHEDULE A (F ITEMIZED RECE	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 285 / 574 (check only one) X
or for commercial purpose: NAME OF COMMITTE	s, other than using the name	and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, John W McTigue		inparty Fodoral FAC	Date of Receipt
Mailing Address 205	E 4th Street		0 7 3 1 2 0 0 9
City Hinsdale	S II	State Zip Code L 60521-4603	Transaction ID: 20090804-1192-10-0 Amount of Each Receipt this Period
FEC ID number of cont federal political committ			208.00
Name of Employer McTigue Fncl Group In	c Oc Sp	cupation pecial Agent	
Receipt For: Primary Other (specify)	General	gregate Year-to-Date ▼ 4368.00	
Full Name (Last, First, John W McTigue Mailing Address 205	Middle Initial) E 4th Street		Date of Receipt
City	S	State Zip Code	0 8 1 5 2 0 0 9 Transaction ID: 20090819-17-14-0
<u>Hinsdale</u>	<u> </u>	'	Amount of Each Receipt this Period
FEC ID number of cont federal political committee			208.00
Name of Employer McTigue Fncl Group In	^	cupation ecial Agent	
Receipt For: Primary Other (specify)	General	gregate Year-to-Date ▼ 4368.00	
Full Name (Last, First, John W McTigue	Middle Initial)		Date of Receipt
Mailing Address 205	E 4th Street		08 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State Zip Code	Transaction ID: 20090902-17-14-46
Hinsdale FEC ID number of cont federal political committed.			Amount of Each Receipt this Period 208.00
Name of Employer McTigue Fncl Group In	c Oc Sp	cupation pecial Agent	
Receipt For: Primary Other (specify)	General Ag	gregate Year-to-Date ▼ 4368.00	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 286 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	d Statements may not be sold or used by any pers the name and address of any political committee to ance Company Federal PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) John W McTigue Mailing Address 205 E 4th Street		Date of Receipt
City Hinsdale FEC ID number of contributing	State Zip Code IL 60521-4603	Transaction ID: 20090921-18-16-16 Amount of Each Receipt this Period 208.00
Name of Employer McTigue Fncl Group Inc Receipt For: Primary Other (specify)	Occupation Special Agent Aggregate Year-to-Date 4368.00	
Full Name (Last, First, Middle Initial) John W McTigue Mailing Address 205 E 4th Street		Date of Receipt 0 9 3 0 2 0 0 9
City Hinsdale FEC ID number of contributing federal political committee.	State Zip Code IL 60521-4603 C	Transaction ID: 20091008103448-18 Amount of Each Receipt this Period 208.00
Name of Employer McTigue Fncl Group Inc Receipt For: Primary General Other (specify) ▼	Occupation Special Agent Aggregate Year-to-Date ▼ 4368.00	
Full Name (Last, First, Middle Initial) John W McTigue Mailing Address 205 E 4th Street		Date of Receipt
City Hinsdale FEC ID number of contributing federal political committee.	State Zip Code IL 60521-4603	Transaction ID: 2009102293957-18 Amount of Each Receipt this Period 208.00
Name of Employer McTigue Fncl Group Inc Receipt For:	Occupation Special Agent Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	4368.00	
SUBTOTAL of Receipts This Page (optional	J)	624.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 287 / 574 (check only one) X
7	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insurar	nce Company	/ Federal PAC	
Α.	Full Name (Last, First, Middle Initial) John W McTigue			Date of Receipt
	Mailing Address 205 E 4th Street			10 31 2009
	City	State IL	Zip Code	Transaction ID: 20091105152043-18
	Hinsdale FEC ID number of contributing federal political committee.	C	60521-4603	Amount of Each Receipt this Period 208.00
	Name of Employer McTigue Fncl Group Inc	Occupation Special /		
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 4368.00	
– В.	Full Name (Last, First, Middle Initial) John W McTigue			Date of Receipt
	Mailing Address 205 E 4th Street	1 1 1 5 2 0 0 9		
	City	State	Zip Code	Transaction ID: 20091118163132-18
	Hinsdale FEC ID number of contributing federal political committee.	C	60521-4603	Amount of Each Receipt this Period 208.00
	Name of Employer McTigue Fncl Group Inc	Occupation Special /		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4368.00	
- C.	Full Name (Last, First, Middle Initial) Daniel J. Meehan			Date of Receipt
	Mailing Address N30W6890 Lincoln B	lv		10 15 2009
	City Cedarburg	State WI	Zip Code 53012-2266	Transaction ID: 20091015164625-578 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		11.00
	Name of Employer NML	Occupation Director	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 231.00	
	SUBTOTAL of Receipts This Page (optional)	1		427.00
	TOTAL This Period (last page this line numbe	er only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 288 / 574 (check only one) X 11a
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
). A .	Full Name (Last, First, Middle Initial) Daniel J. Meehan			Date of Receipt
	Mailing Address N30W6890 Lincoln Bl City Cedarburg	State WI	Zip Code 53012-2266	Transaction ID: 20091105152628-578 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer NML	Occupation	on	11.00
	Receipt For: Primary General Other (specify)	Director Aggregate	e Year-to-Date ▼ 231.00	
В.	Full Name (Last, First, Middle Initial) Daniel J. Meehan Mailing Address N30W6890 Lincoln Bl	v		Date of Receipt
	City Cedarburg	State WI	Zip Code 53012-2266	Transaction ID: 2009111816423-579 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer NML	Occupation	on	11.00
	Receipt For: Primary General Other (specify)	Director Aggregate	e Year-to-Date ▼ 231.00	
с. С.	Full Name (Last, First, Middle Initial) Joseph F Meier Mailing Address 208 Long Acres Lane	1		Date of Receipt
	City Oviedo	State FL	Zip Code 32765-7843	0 7 1 5 2 0 0 9 Transaction ID: 20090720-1198-13-1
	FEC ID number of contributing federal political committee.	C	32/03-7043	Amount of Each Receipt this Period 42.00
	Name of Employer Self-Employed	, ·	Insurance Agent	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 882.00	
	SUBTOTAL of Receipts This Page (optional)			64.00
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 289 / 574 (check only one) X
\ \ \	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	name and add	ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
. ∠ . .	Full Name (Last, First, Middle Initial) Joseph F Meier			Date of Receipt
	Mailing Address 208 Long Acres Lane			07 31 2009
	City Oviedo	State FL	Zip Code 32765-7843	Transaction ID: 20090804-1196-10-0
	FEC ID number of contributing federal political committee.	C	32/03-7043	Amount of Each Receipt this Period 42.00
	Name of Employer Self-Employed	Occupation General I	nsurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 882.00	
_ 3.	Full Name (Last, First, Middle Initial) Joseph F Meier Mailing Address 208 Long Acres Lane			Date of Receipt
			7' 0 1	08 15 2009
	City Oviedo	State FL	Zip Code 32765-7843	Transaction ID: 20090819-21-14-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	02703 7040	42.00
	Name of Employer Self-Employed	Occupation General I	nsurance Agent	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 882.00	
	Full Name (Last, First, Middle Initial) Joseph F Meier Mailing Address 208 Long Acres Lane			Date of Receipt
	City	State	Zip Code	0 8 3 1 2 0 0 9 Transaction ID: 20090902-21-14-46
	Oviedo	FL	32765-7843	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Self-Employed		nsurance Agent	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 882.00	
	SUBTOTAL of Receipts This Page (optional)			126.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 290 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and address of any political commit	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Joseph F Meier Mailing Address 208 Long Acres Lane City Oviedo FEC ID number of contributing federal political committee. Name of Employer Self-Employed	State Zip Code FL 32765-7843 C Occupation	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify)	General Insurance Agent Aggregate Year-to-Date ▼ 882.00	
Full Name (Last, First, Middle Initial) Joseph F Meier Mailing Address 208 Long Acres Lane		Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20091008103448-21
Oviedo FEC ID number of contributing federal political committee.	FL 32765-7843	Amount of Each Receipt this Period 42.00
Name of Employer Self-Employed Receipt For: Primary General Other (specify)	Occupation General Insurance Agent Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Joseph F Meier		Date of Receipt
		10 15 7 2009
City Oviedo	State Zip Code FL 32765-7843	Transaction ID: 2009102293957-21 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 32703-7043	42.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)	1	126.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 291 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Joseph F Meier Mailing Address 208 Long Acres Lane City Oviedo FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For:	State Zip Code FL 32765-7843 C Occupation General Insurance Agent Aggregate Year-to-Date	Date of Receipt 10 31 2009 Transaction ID: 20091105152043-21 Amount of Each Receipt this Period 42.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Joseph F Meier Mailing Address 208 Long Acres Lane	882.00	Date of Receipt
Mailing Address 208 Long Acres Lane City Oviedo FEC ID number of contributing federal political committee.	State Zip Code FL 32765-7843	1 1 1 5 2 0 0 9 Transaction ID: 20091118163132-21 Amount of Each Receipt this Period 42.00
Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼	Occupation General Insurance Agent Aggregate Year-to-Date 882.00	
Full Name (Last, First, Middle Initial) Robert G. Meilander Mailing Address 6900 N Glen Shore Di	rive	Date of Receipt 0 7 1 5 2 0 0 9
City Glendale FEC ID number of contributing federal political committee.	State Zip Code WI 53209-2819	Transaction ID: 20090720-576-13-0 Amount of Each Receipt this Period 30.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation VP-Corp Actuary Aggregate Year-to-Date ▼ 630.00	
SUBTOTAL of Receipts This Page (optional) .	1	114.00

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 292 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16
nny information copied from such Reports and r for commercial purposes, other than using to NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	d Statements may not be sold or used by any persite name and address of any political committee to	
/ The Northwestern Mutual Life insura	ance Company Federal FAC	
Full Name (Last, First, Middle Initial) Robert G. Meilander Mailing Address 6900 N Glen Shore	Drive	Date of Receipt
Walling Address 6900 N Gleff Shore	Drive	07 31 2009
City	State Zip Code	Transaction ID: 20090804-576-10-0
Glendale	WI 53209-2819	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer NML	Occupation VP-Corp Actuary	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	630.00	
Full Name (Last, First, Middle Initial) Robert G. Meilander	Date of Receipt	
Mailing Address 6900 N Glen Shore	Drive	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20090819-644-14-1
Glendale	WI 53209-2819	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	30.00
Name of Employer NML	Occupation VP-Corp Actuary	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	630.00	
Full Name (Last, First, Middle Initial) Robert G. Meilander		Date of Receipt
Mailing Address 6900 N Glen Shore	Drive	08 31 2009
City	State Zip Code	Transaction ID: 20090902-644-15-1
Glendale	WI 53209-2819	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer NML	Occupation VP-Corp Actuary	
Receipt For:	Aggregate Year-to-Date ▼	
Primary ☐ General Other (specify) ▼	630.00	
)	90.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 293 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17			
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura					
Full Name (Last, First, Middle Initial) Robert G. Meilander		Date of Receipt			
Mailing Address 6900 N Glen Shore	Drive	09 / 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City Glendale	State Zip Code WI 53209-2819	Transaction ID: 20090921-642-17-1 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	30.00			
Name of Employer NML	Occupation VP-Corp Actuary				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00				
Full Name (Last, First, Middle Initial) Robert G. Meilander		Date of Receipt			
Mailing Address 6900 N Glen Shore	Mailing Address 6900 N Glen Shore Drive				
City	State Zip Code	0 9 3 0 2 0 0 9 Transaction ID: 20091008104013-568			
Glendale	WI 53209-2819	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	30.00			
Name of Employer NML	Occupation VP-Corp Actuary				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00				
Full Name (Last, First, Middle Initial) Robert G. Meilander		Date of Receipt			
Mailing Address 6900 N Glen Shore	Drive	10 15 2009			
City	State Zip Code	Transaction ID: 20091015164625-567			
Glendale FEC ID number of contributing federal political committee.	WI 53209-2819	Amount of Each Receipt this Period 30.00			
Name of Employer NML	Occupation VP-Corp Actuary				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00				
SUBTOTAL of Receipts This Page (optional)	90.00			
TOTAL This Period (last page this line numb					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 294 / 574 (check only one) X
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	ice Company	/ Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Robert G. Meilander			Date of Receipt
	Mailing Address 6900 N Glen Shore D	rive		10 31 2009
	City <u>Glendale</u>	State WI	Zip Code 53209-2819	Transaction ID: 20091105152628-567 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer NML	Occupation VP-Corp		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 630.00	
В.	Full Name (Last, First, Middle Initial) Robert G. Meilander Mailing Address 6000 N. Clan Share D.	rivo		Date of Receipt
	Mailing Address 6900 N Glen Shore D	11 1 15 2009		
	City Glendale	State WI	Zip Code 53209-2819	Transaction ID: 2009111816423-568 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1 1 1	30.00
	Name of Employer NML	Occupation VP-Corp		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼	0 0	630.00	
С.	Full Name (Last, First, Middle Initial) Richard D Mellinger			Date of Receipt
	Mailing Address 50960 Fox Trail			07 15 2009
	City Granger	State IN	Zip Code 46530-9039	Transaction ID: 20090720-1180-13-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000 3003	25.00
	Name of Employer Self-Employed	Occupation General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 525.00	
	SUBTOTAL of Receipts This Page (optional) .	1		85.00
ļ	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 295 / 574 (check only one) X 11a 11b 11c 12
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur		
Full Name (Last, First, Middle Initial) Richard D Mellinger		Date of Receipt
Mailing Address 50960 Fox Trail		07 31 7 2009
City	State Zip Code	Transaction ID: 20090804-1178-10-0
Granger	IN 46530-9039	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	
Full Name (Last, First, Middle Initial) Richard D Mellinger		Date of Receipt
Mailing Address 50960 Fox Trail		08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20090819-3-14-0
Granger	IN 46530-9039	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	525.00	
Full Name (Last, First, Middle Initial) Richard D Mellinger		Date of Receipt
Mailing Address 50960 Fox Trail		08 31 7 2009
City	State Zip Code	Transaction ID: 20090902-3-14-46
Granger	IN 46530-9039	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	
	J)	75.00

SCHEDULE ITEMIZED F	A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 296 / 574 (check only one) X
or for commercial NAME OF CO	opied from such Reports and Sta purposes, other than using the i MMITTEE (In Full) estern Mutual Life Insurance	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A. Richard D Mellin Mailing Addres City Granger FEC ID numbe federal political	s 50960 Fox Trail	State IN	Zip Code 46530-9039	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employed Self-Employed Receipt For: Primary Other (sp	General		Insurance Agent Year-to-Date ▼ 525.00	
Richard D Mellin	st, First, Middle Initial) nger s 50960 Fox Trail	State	Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
Granger FEC ID numbe federal political		IN C	46530-9039	Amount of Each Receipt this Period 25.00
Name of Employed Receipt For: Primary Other (sp	General	General	Insurance Agent P Year-to-Date ▼ 525.00	
Full Name (Las Richard D Mellin Mailing Addres	-			Date of Receipt 1 0 1 5 2 0 0 9
	or of contributing	State IN	Zip Code 46530-9039	Transaction ID: 2009102293957-3 Amount of Each Receipt this Period 25.00
federal political Name of Employed Self-Employed		Occupation	n Insurance Agent	
Receipt For: Primary Other (sp	General pecify) ▼	Aggregate	Year-to-Date ▼ 525.00	
SUBTOTAL of R	eceipts This Page (optional)			75.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 297 / 574 (check only one) X
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ce Company	y Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Richard D Mellinger			Date of Receipt
	Mailing Address 50960 Fox Trail	2: :	7: 0.1	10 31 2009
	City <u>Granger</u>	State IN	Zip Code 46530-9039	Transaction ID: 20091105152043-3 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer Self-Employed	Occupation General	on Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 525.00	
В.	Full Name (Last, First, Middle Initial) Richard D Mellinger Meiling Address F0000 Few Trail	I		Date of Receipt
	Mailing Address 50960 Fox Trail			11 1 15 2009
	City Granger	State IN	Zip Code 46530-9039	Transaction ID: 20091118163132-3 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1 1	25.00
	Name of Employer Self-Employed	Occupation General	on Insurance Agent	
	Receipt For: ☐ Primary ☐ General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 525.00	
с.	Full Name (Last, First, Middle Initial) Richard E. Meyers			Date of Receipt
	Mailing Address 848 E Birch Avenue			1 1 1 5 2 0 0 9
	City Whitefish Bay	State WI	Zip Code 53217-5359	Transaction ID: 2009111816423-1057 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30217 3033	10.00
	Name of Employer NML	Occupation Asst Gc	on & Asst Sec	
	Receipt For: Primary General Other (specify) ▼	, '	e Year-to-Date ▼ 210.00	
	SUBTOTAL of Receipts This Page (optional) .	1		60.00
ļ	TOTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 298 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ai	ny information copied from such Reports and for commercial purposes, other than using the	Statements ma ne name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insural	nce Company	Federal PAC	
	Full Name (Last, First, Middle Initial) Carl W Middleton, III			Date of Receipt
	Mailing Address 15712 Point Monroe	Drive Northea	ast	07 15 2009
	City	State	Zip Code	Transaction ID: 20090720-1183-13-1
	Bainbridge Island	WA	98110-1158	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer Self-Employed	Occupation General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2625.00	
_	Full Name (Last, First, Middle Initial) Carl W Middleton, III			Date of Receipt
	Mailing Address 15712 Point Monroe Drive Northeast			07 31 2009
	City	State	Zip Code	Transaction ID: 20090804-1181-10-0
	Bainbridge Island	WA	98110-1158	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer Self-Employed	Occupation General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2625.00	
	Full Name (Last, First, Middle Initial) Carl W Middleton, III			Date of Receipt
	Mailing Address 15712 Point Monroe	Drive Northea	ast	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20090819-6-14-0
	Bainbridge Island	WA	98110-1158	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer Self-Employed	Occupation General	n Insurance Agent	
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼		2625.00	
	UIDTOTAL of Descripto This Descriptoral			375.00
	SUBTOTAL of Receipts This Page (optional)		······	
T	OTAL This Period (last page this line number	er only))	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 299 / 574 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	Statements may not be sold or used by any per- le name and address of any political committee nce Company Federal PAC	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Carl W Middleton, III Mailing Address 15712 Point Monroe	Drive Northeast	Date of Receipt 0 8 3 1 2 0 0 9
City	State Zip Code	Transaction ID: 20090902-6-14-46
Bainbridge Island	WA 98110-1158	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2625.00	
Full Name (Last, First, Middle Initial) Carl W Middleton, III		Date of Receipt
Mailing Address 15712 Point Monroe		09 15 2009
City	State Zip Code	Transaction ID: 20090921-6-16-16
Bainbridge Island FEC ID number of contributing federal political committee.	WA 98110-1158	Amount of Each Receipt this Period 125.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2625.00	
Full Name (Last, First, Middle Initial) Carl W Middleton, III		Date of Receipt
Mailing Address 15712 Point Monroe		09 30 7 2009
City	State Zip Code	Transaction ID: 20091008103448-6
Bainbridge Island	WA 98110-1158	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2625.00	
		375.00

Γ	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 300 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 1
\ \ \	Any information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial)	oo company i casiai i ric	
۱.	Carl W Middleton, III Mailing Address 15712 Point Monroe D	Date of Receipt 1 0 1 5 2 0 0 9	
	City Bainbridge Island	State Zip Code WA 98110-1158	Transaction ID: 2009102293957-6 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	125.00
	Name of Employer Self-Employed	Occupation General Insurance Agent	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 2625.00	
-	Full Name (Last, First, Middle Initial) Carl W Middleton, III Mailing Address 15712 Point Monroe D	rive Northeast	Date of Receipt 1 0 0 3 1 2 0 0 9
	City	State Zip Code	Transaction ID: 20091105152043-6
	Bainbridge Island FEC ID number of contributing federal political committee.	WA 98110-1158	Amount of Each Receipt this Period 125.00
	Name of Employer Self-Employed	Occupation General Insurance Agent	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 2625.00	
	Full Name (Last, First, Middle Initial) Carl W Middleton, III	. No the sect	Date of Receipt
	Mailing Address 15712 Point Monroe D		11 1 15 2009
	City Bainbridge Island	State Zip Code WA 98110-1158	Transaction ID: 20091118163132-6 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	125.00
	Name of Employer Self-Employed	Occupation General Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2625.00	
	SUBTOTAL of Receipts This Page (optional)	1	375.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 301 / 574 (check only one) X
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ce Company	Federal PAC	
∠ A.	Full Name (Last, First, Middle Initial) Ben Miller			Date of Receipt
	Mailing Address 34 Storyteller Court			07 15 2009
	City Sandia Park	State NM	Zip Code 87047-8542	Transaction ID: 20090720-1239-13-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	0.017 00.12	50.00
	Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 1010.00	
— В.	Full Name (Last, First, Middle Initial) Ben Miller			Date of Receipt
	Mailing Address 34 Storyteller Court			07 31 YYYY 2009
	City	State	Zip Code	Transaction ID: 20090804-1236-10-0
	Sandia Park	NM	87047-8542	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
	Receipt For:	, ·	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	1010.00	
 C.	Full Name (Last, First, Middle Initial) Ben Miller			Date of Receipt
	Mailing Address 34 Storyteller Court			0 8
	City	State	Zip Code	Transaction ID: 20090819-61-14-0
	Sandia Park	NM	87047-8542	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Self-Employed	, ·	Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1010.00	
Γ,	SUBTOTAL of Receipts This Page (optional)	•		150.00
F	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 302 / 574 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	d Statements may not be sold or used by any personant the name and address of any political committee to ance Company Federal PAC	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ben Miller Mailing Address 34 Storyteller Court		Date of Receipt
City Sandia Park FEC ID number of contributing	State Zip Code NM 87047-8542	0 8 3 1 2 0 0 9
federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼	Occupation General Insurance Agent Aggregate Year-to-Date 1010.00	30.00
Full Name (Last, First, Middle Initial) Ben Miller Mailing Address 34 Storyteller Court		Date of Receipt 0 9 1 5 2 0 0 9
City Sandia Park FEC ID number of contributing federal political committee.	State Zip Code NM 87047-8542	Transaction ID: 20090921-65-16-16 Amount of Each Receipt this Period 42.00
Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼	Occupation General Insurance Agent Aggregate Year-to-Date 1010.00	
Full Name (Last, First, Middle Initial) Ben Miller Mailing Address 34 Storyteller Court		Date of Receipt
City Sandia Park FEC ID number of contributing federal political committee.	State Zip Code NM 87047-8542	Transaction ID: 20091008103448-65 Amount of Each Receipt this Period 42.00
Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼	Occupation General Insurance Agent Aggregate Year-to-Date 1010.00	
SUBTOTAL of Receipts This Page (optional)	134.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 303/5/4 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	rance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Ben Miller			Date of Receipt
Mailing Address 34 Storyteller Court	t		10 15 2009
City Sandia Park	State NM	Zip Code 87047-8542	Transaction ID: 2009102293957-65 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1010.00	
Full Name (Last, First, Middle Initial) Ben Miller			Date of Receipt
Mailing Address 34 Storyteller Court	10 31 2009		
City Sandia Park	State NM	Zip Code 87047-8542	Transaction ID: 20091105152043-65 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
Receipt For: Primary General Other (specify)		e Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Ben Miller			Date of Receipt
Mailing Address 34 Storyteller Court	t		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Sandia Park	State NM	Zip Code 87047-8542	Transaction ID: 20091118163132-6
FEC ID number of contributing federal political committee.	C	07047-6342	Amount of Each Receipt this Period 42.00
Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional	al)		126.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	2	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 304 / 574 (check only one) X		
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	The Northwestern Mutual Life insuran	ce Company	rederal FAC	_		
Α.	Full Name (Last, First, Middle Initial) Jay W. Miller			Date of Receipt		
	Mailing Address 4820 N Oakland Aven	07 15 2009				
	City	State	Zip Code	Transaction ID: 20090720-1075-13-0		
	Whitefish Bay	WI	53217-6050	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer NML	Occupatio VP Adv F				
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General Other (specify) ▼		400.00			
- В.	Full Name (Last, First, Middle Initial) Jay W. Miller			Date of Receipt		
	Mailing Address 4820 N Oakland Aven		07			
	City	State	Zip Code	Transaction ID: 20090804-1073-10-0		
	Whitefish Bay	WI	53217-6050	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer NML	Occupatio VP Adv F				
	Receipt For:	, '	e Year-to-Date			
	Primary General	7.99.094.0	400.00	1		
	Other (specify) ▼		400.00			
С.	Full Name (Last, First, Middle Initial) Jay W. Miller			Date of Receipt		
	Mailing Address 4820 N Oakland Aven	•				
	City	State	Zip Code	Transaction ID: 20090819-1139-14-15		
	Whitefish Bay	WI	53217-6050	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer NML	Occupatio VP Adv F				
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General Other (specify) ▼		400.00			
ſ	SURTOTAL of Receipts This Page (actions!)	1		75.00		
}	SUBTOTAL of Receipts This Page (optional)					
	TOTAL This Period (last page this line number	only)				

ITEMIZED RE	A (FEC Form 3X) ECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 305 / 5 (check only one) X)//4
or for commercial pu	rposes, other than using the r	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
Full Name (Last, Jay W. Miller	First, Middle Initial)			Date of Receipt	
Mailing Address City	4820 N Oakland Avenu	0 8 3 1 2 0 0 9 Transaction ID: 20090902-1139-1			
Whitefish Bay		State WI	Zip Code 53217-6050	Amount of Each Receipt this Period	13-1
FEC ID number of federal political co		C	33277 0000	25.00	
Name of Employe	er	Occupation VP Adv F			
Receipt For: Primary Other (spec	General	Aggregate	Year-to-Date ▼ 400.00		
Kevin E Miller	First, Middle Initial)			Date of Receipt	
Mailing Address	214 Schenley Road	07 15 2009			
City		State	Zip Code	Transaction ID: 20090720-1228-1	13-1
<u>Pittsburgh</u>		PA	15217-1171	Amount of Each Receipt this Period	
FEC ID number of federal political co		C		43.00	
Name of Employe KEM FncI Service	er es Inc	Occupation Special A			
Receipt For: Primary Other (spec	General gify) ▼	Aggregate	Year-to-Date ▼ 1728.00]	
Full Name (Last, Kevin E Miller	First, Middle Initial)			Date of Receipt	
Mailing Address	214 Schenley Road			07 31 2009	
City		State	Zip Code	Transaction ID: 20090804-1225-1	10-0
Pittsburgh		PA	15217-1171	Amount of Each Receipt this Period	
FEC ID number of federal political co		С		43.00	
Name of Employe	er es Inc	Occupation Special A	agent		
Receipt For: Primary Other (spec	General	Aggregate	Year-to-Date ▼ 1728.00		
SUBTOTAL of Rec	eipts This Page (optional)			111.00	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 306 / 574 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	nd Statements may not be sold or used by any personant the name and address of any political committee to ance Company Federal PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Kevin E Miller Mailing Address 214 Schenley Road		Date of Receipt
City Pittsburgh FEC ID number of contributing	State Zip Code PA 15217-1171	Transaction ID: 20090819-50-14-0 Amount of Each Receipt this Period 43.00
Receipt For: Primary Other (specify) General	Occupation Special Agent Aggregate Year-to-Date 1728.00	40.00
Full Name (Last, First, Middle Initial) Kevin E Miller Mailing Address 214 Schenley Road		Date of Receipt 0 8 3 1 2 0 0 9
City Pittsburgh FEC ID number of contributing federal political committee.	State Zip Code PA 15217-1171 C	Transaction ID: 20090902-50-14-46 Amount of Each Receipt this Period 43.00
Name of Employer KEM FncI Services Inc Receipt For: Primary General Other (specify) ▼	Occupation Special Agent Aggregate Year-to-Date 1728.00	
Full Name (Last, First, Middle Initial) Kevin E Miller Mailing Address 214 Schenley Road		Date of Receipt
City Pittsburgh FEC ID number of contributing federal political committee.	State Zip Code PA 15217-1171 C	Transaction ID: 20090921-51-16-16 Amount of Each Receipt this Period 208.00
Name of Employer KEM Fncl Services Inc Receipt For: Primary Other (specify)	Occupation Special Agent Aggregate Year-to-Date ▼ 1728.00	
SUBTOTAL of Receipts This Page (optional	1)	294.00

SCHEDULE ITEMIZED F	A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 307 / 57 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial NAME OF CO	pied from such Reports and purposes, other than using th MMITTEE (In Full) estern Mutual Life Insurar	e name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Kevin E Miller	t, First, Middle Initial) s 214 Schenley Road			Date of Receipt
City Pittsburgh		State PA	Zip Code 15217-1171	Transaction ID: 20091008103448- Amount of Each Receipt this Period
FEC ID numbe federal political Name of Emplo KEM Fncl Sen		Occupatio		208.00
Receipt For: Primary Other (sp	General	Special Aggregate	Agent e Year-to-Date ▼ 1728.00	
Kevin E Miller	t, First, Middle Initial) s 214 Schenley Road			Date of Receipt 10 15 2009
City		State	Zip Code	Transaction ID: 2009102293957-5
<u>Pittsburgh</u>		PA	15217-1171	Amount of Each Receipt this Period
FEC ID numbe federal political	r of contributing committee.	C		208.00
Name of Emplo KEM Fncl Serv	oyer rices Inc	Occupatio Special A		
Receipt For: Primary Other (sp	General pecify) ▼	- ' ' '	e Year-to-Date ▼ 1728.00	
Full Name (Las Kevin E Miller	t, First, Middle Initial)	1		Date of Receipt
Mailing Addres	s 214 Schenley Road			10 31 YYYYY
City		State	Zip Code	Transaction ID: 20091105152043-
Pittsburgh FEC ID numbe federal political	r of contributing committee.	PA C	15217-1171	Amount of Each Receipt this Period 208.00
Name of Emplo KEM Fncl Serv	oyer rices Inc	Occupatio Special A		
Receipt For: Primary Other (sp	General pecify) ▼	- ' '	e Year-to-Date ▼ 1728.00	
SUBTOTAL of R	eceipts This Page (optional) .)	624.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 308 / 574 (check only one) X
Į.	ny information copied from such Reports and r for commercial purposes, other than using th	Statements ma e name and ad	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	Federal PAC	
	Full Name (Last, First, Middle Initial) Kevin E Miller			Date of Receipt
	Mailing Address 214 Schenley Road			11 15 2009
	City <u>Pittsburgh</u>	State PA	Zip Code 15217-1171	Transaction ID: 20091118163132-51 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.00
	Name of Employer KEM Fncl Services Inc	Occupatio Special A		
	Receipt For: Primary General Other (specify) ▼	 	e Year-to-Date ▼ 1728.00	
. –	Full Name (Last, First, Middle Initial) Karen A. Molloy			Date of Receipt
	Mailing Address 2004 N 85th Street			M M / D D / Y Y Y Y Y Y 1 1 1 1 1 1 1 1 1 1 1 1 1
	City State		Zip Code	Transaction ID: 20091015164625-899
	Wauwatosa	WI	53226-2846	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.00
	Name of Employer NML	Occupatio Asst Trea		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		228.00	
_	Full Name (Last, First, Middle Initial) Karen A. Molloy			Date of Receipt
	Mailing Address 2004 N 85th Street		M M / D D / Y Y Y Y Y Y 1 1 0 1 0 1 0 1 0 1 0 1 0 1	
	City	State WI	Zip Code 53226-2846	Transaction ID: 20091105152628-899
	Wauwatosa FEC ID number of contributing federal political committee.	C	33220-2040	Amount of Each Receipt this Period 12.00
	Name of Employer NML	Occupatio Asst Trea		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 228.00	
Г	SUBTOTAL of Receipts This Page (optional)	1		232.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 309 / 574 (check only one) X 11a	
	Any information copied from such Reports and 3 or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ice Company	/ Federal PAC		
ا A.	Full Name (Last, First, Middle Initial) Karen A. Molloy			Date of Receipt	
	Mailing Address 2004 N 85th Street			1 1 1 5 2 0 0 9	
	City	State	Zip Code	Transaction ID: 2009111816423-899	
	Wauwatosa	WI	53226-2846	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		12.00	
	Name of Employer NML	Occupation Asst Tre			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		228.00		
В.	Full Name (Last, First, Middle Initial) Scott J. Morris			Date of Receipt	
	Mailing Address 4406 N Madero Drive			09 15 2009	
	City	State	Zip Code	Transaction ID: 20090921-1150-17-1	
	<u>Mequon</u>	WI	53092-8711	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		15.00	
	Name of Employer NML	Occupation Asst Gc	n & Asst Sec		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	267.00		
C.	Full Name (Last, First, Middle Initial) Scott J. Morris			Date of Receipt	
	Mailing Address 4406 N Madero Drive	Mailing Address 4406 N Madero Drive			
	City	State	Zip Code	Transaction ID: 20091008104013-1077	
	Mequon	WI	53092-8711	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		15.00	
	Name of Employer NML	Occupation Asst Gc	n & Asst Sec		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	267.00		
	SUBTOTAL of Receipts This Page (optional) .			42.00	
	TOTAL This Period (last page this line number				

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 310 / 574 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	d Statements may not be sold or used by any personance Company Federal PAC	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Scott J. Morris Mailing Address 4406 N Madero Driv	e	Date of Receipt
City Mequon FEC ID number of contributing	State Zip Code WI 53092-8711	Transaction ID: 20091015164625-1075 Amount of Each Receipt this Period
Receipt For: Primary General	Occupation Asst Gc & Asst Sec Aggregate Year-to-Date 267.00	15.00
Full Name (Last, First, Middle Initial) Scott J. Morris Mailing Address 4406 N Madero Driv	0 0 0 0 0 0 0 0 0	Date of Receipt 1 0 3 1 2 0 0 9
City Mequon FEC ID number of contributing federal political committee.	State Zip Code WI 53092-8711 C	Transaction ID: 20091105152628-1079 Amount of Each Receipt this Period 15.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation Asst Gc & Asst Sec Aggregate Year-to-Date ▼ 267.00]
Full Name (Last, First, Middle Initial) Scott J. Morris Mailing Address 4406 N Madero Driv	e	Date of Receipt 1 1 1 1 5 2 0 0 9
City Mequon FEC ID number of contributing federal political committee.	State Zip Code WI 53092-8711	Transaction ID: 2009111816423-1074 Amount of Each Receipt this Period 15.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation Asst Gc & Asst Sec Aggregate Year-to-Date 267.00	
SUBTOTAL of Receipts This Page (optional)	45.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 311 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	d Statements may not be sold or used by any persithe name and address of any political committee that the company Federal PAC	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Martin A. Moser Mailing Address 378 Juniper Court		Date of Receipt 0 7 1 5 2 0 0 9
City Grafton FEC ID number of contributing federal political committee.	State Zip Code WI 53024-2270	Transaction ID: 20090720-619-13-0 Amount of Each Receipt this Period 22.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation Director Aggregate Year-to-Date 390.00	
Full Name (Last, First, Middle Initial) Martin A. Moser Mailing Address 378 Juniper Court		Date of Receipt 0 7 3 1 2 0 0 9
City Grafton FEC ID number of contributing federal political committee.	State Zip Code WI 53024-2270	Transaction ID: 20090804-619-10-0 Amount of Each Receipt this Period 22.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation Director Aggregate Year-to-Date 390.00	
Full Name (Last, First, Middle Initial) Martin A. Moser Mailing Address 378 Juniper Court		Date of Receipt
City Grafton FEC ID number of contributing federal political committee.	State Zip Code WI 53024-2270 C	Transaction ID: 20090819-686-14-15 Amount of Each Receipt this Period 22.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation Director Aggregate Year-to-Date 390.00	
SUBTOTAL of Receipts This Page (optional	<u> </u>	66.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 312 / 574 (check only one) X
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insurar	nce Company	/ Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Martin A. Moser Mailing Address 378 Juniper Court			Date of Receipt
	Mailing Address 378 Juniper Court City	State	Zip Code	0 8 3 1 2 0 0 9 Transaction ID: 20090902-686-15-1
	<u>Grafton</u>	WI	53024-2270	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		22.00
	Name of Employer NML	Occupation Director	on	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 390.00	
В.	Full Name (Last, First, Middle Initial) Martin A. Moser Mailing Address 378 Juniper Court			Date of Receipt
				09 15 2009
	City Grafton	State WI	Zip Code 53024-2270	Transaction ID: 20090921-682-17-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1 1	22.00
	Name of Employer NML	Occupation Director	on	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 390.00	
C.	Full Name (Last, First, Middle Initial) Martin A. Moser			Date of Receipt
	Mailing Address 378 Juniper Court			09 / 30 / 2009
	City <u>Grafton</u>	State WI	Zip Code 53024-2270	Transaction ID: 20091008104013-608 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	3002+2270	22.00
	Name of Employer NML	Occupation Director	on	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 390.00	
	SUBTOTAL of Receipts This Page (optional) .			66.00
	TOTAL This Period (last page this line numbe	r only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 313 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Martin A. Moser		, rederait No	Date of Receipt
	Mailing Address 378 Juniper Court			10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City <u>Grafton</u>	State WI	Zip Code 53024-2270	Transaction ID: 20091015164625-607 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		22.00
	Name of Employer NML	Occupation Director	n	
	Receipt For: Primary General Other (specify) ▼	, '	e Year-to-Date ▼ 390.00	
- В.	Full Name (Last, First, Middle Initial) Martin A. Moser Mailing Address 378 Juniper Court			Date of Receipt
	City	State	Zip Code	1 0 3 1 2 0 0 9 Transaction ID: 20091105152628-607
	Grafton	WI	53024-2270	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		22.00
	Name of Employer NML	Occupation Director	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 390.00	
- C.	Full Name (Last, First, Middle Initial) Martin A. Moser			Date of Receipt
	Mailing Address 378 Juniper Court			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Grafton	State WI	Zip Code 53024-2270	Transaction ID: 2009111816423-608 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		22.00
	Name of Employer NML	Occupation Director	n	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 390.00	
	SUBTOTAL of Receipts This Page (optional)	1		66.00
f	TOTAL This Period (last page this line number	r only)	·	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 314 / 574 (check only one) X 11a		
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ce Company	/ Federal PAC			
A.	Full Name (Last, First, Middle Initial) Thomas A. Mroczkowski			Date of Receipt		
	Mailing Address W323 S8450 Nebo Tra	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	City <u>Mukwonago</u>	State WI	Zip Code 53149	Transaction ID: 2009111816423-806 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		10.00		
	Name of Employer NML	Occupation Dir IS Ar				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 210.00			
В.	Full Name (Last, First, Middle Initial) David K. Nelson	Date of Receipt				
	Mailing Address 1506 E Fox Lane	09 15 2009				
	City Fox Point	State WI	Zip Code 53217-2853	Transaction ID: 20090921-752-17-1 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		13.00		
	Name of Employer NML	Occupation Asst Gc	an & Asst Sec			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 261.00			
с.	Full Name (Last, First, Middle Initial) David K. Nelson	Date of Receipt				
	Mailing Address 1506 E Fox Lane					
	City Fox Point	State WI	Zip Code 53217-2853	Transaction ID: 20091008104013-679		
	FEC ID number of contributing federal political committee.	C	33217-2033	Amount of Each Receipt this Period 13.00		
	Name of Employer NML	Occupation Asst Gc	on & Asst Sec			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 261.00			
	SUBTOTAL of Receipts This Page (optional)			36.00		
ļ	TOTAL This Period (last page this line number	only)				

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 315 / 574 (check only one) X
(Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (4.5. II)	Statements may ne name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insural	nce Company	Federal PAC	
۸.	Full Name (Last, First, Middle Initial) David K. Nelson			Date of Receipt
	Mailing Address 1506 E Fox Lane			10 15 2009
	City Fox Point	State WI	Zip Code 53217-2853	Transaction ID: 20091015164625-678
	FEC ID number of contributing federal political committee.	C	33217-2033	Amount of Each Receipt this Period 13.00
	Name of Employer NML	Occupation Asst Gc	n & Asst Sec	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 261.00	
_ 3.	Full Name (Last, First, Middle Initial) David K. Nelson	Date of Receipt		
	Mailing Address 1506 E Fox Lane	10 31 YYYY 2009		
	City	State	Zip Code	Transaction ID: 20091105152628-678
	Fox Point WI FEC ID number of contributing federal political committee. C		53217-2853	Amount of Each Receipt this Period
				13.00
	Name of Employer NML	Occupation Asst Gc	n & Asst Sec	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	261.00	
- :.	Full Name (Last, First, Middle Initial) David K. Nelson	Date of Receipt		
	Mailing Address 1506 E Fox Lane	1 1 1 1 5 2 0 0 9		
	City	State	Zip Code	Transaction ID: 2009111816423-678
	Fox Point	WI	53217-2853	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		13.00
	Name of Employer Occupation NML Asst Gc 8		& Asst Sec	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 261.00	
Γ	SUBTOTAL of Receipts This Page (optional)	L		39.00

	EDULE A (FEC Form 3X) IZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 316 / 574 (check only one) X
or for co	ommercial purposes, other than using the	Statements mage name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	IE OF COMMITTEE (In Full) Northwestern Mutual Life Insuran	ce Company	Federal PAC	
	Name (Last, First, Middle Initial) ald C. Nelson			Date of Receipt
	ng Address 5275 N Lake Drive			07 15 2009
City <u>W</u> hi	tefish Bay	State WI	Zip Code 53217-5371	Transaction ID: 20090720-629-13-0 Amount of Each Receipt this Period
FEC	ID number of contributing ral political committee.	C		18.00
Nam NML	e of Employer -	Occupatio Dir Prd D	n Dev & Strat	
Rece	eipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 402.00	
B. Rona	Name (Last, First, Middle Initial) ald C. Nelson	Date of Receipt		
Maili 	ng Address 5275 N Lake Drive	07 31 2009		
City	tefish Bay	State WI	Zip Code	Transaction ID: 20090804-629-10-0
FEC	ID number of contributing ral political committee.	C	53217-5371	Amount of Each Receipt this Period 18.00
Nam NML	e of Employer	Occupation Dir Prd D	n Dev & Strat	
Rece	eipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 402.00	
	Name (Last, First, Middle Initial)	Date of Receipt		
Maili	ng Address 5275 N Lake Drive			0 8 1 5 2 0 0 9
City	tefish Bay	State WI	Zip Code 53217-5371	Transaction ID: 20090819-696-14-15
FEC	ID number of contributing ral political committee.	C	55217-5571	Amount of Each Receipt this Period 18.00
Nam NML	e of Employer -	Occupatio Dir Prd D	n Dev & Strat	
Rece	eipt For: Primary ☐ General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 402.00	
SUBTO	DTAL of Receipts This Page (optional)			54.00
	This Period (last page this line number			

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 317 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 16	
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	d Statements may not be sold or used by any personance and address of any political committee to ance Company Federal PAC	on for the purpose of soliciting contributions	
Full Name (Last, First, Middle Initial) Ronald C. Nelson Mailing Address 5275 N Lake Drive City Whitefish Bay	State Zip Code WI 53217-5371	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
FEC ID number of contributing federal political committee.	C	18.00	
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation Dir Prd Dev & Strat Aggregate Year-to-Date 402.00		
Full Name (Last, First, Middle Initial) Ronald C. Nelson Mailing Address 5275 N Lake Drive	Date of Receipt 0 9 1 5 2 0 0 9		
City Whitefish Bay	State Zip Code WI 53217-5371	Transaction ID: 20090921-692-17-1 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	18.00	
Name of Employer NML	Occupation Dir Prd Dev & Strat		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 402.00		
Full Name (Last, First, Middle Initial) Ronald C. Nelson Mailing Address 5275 N Lake Drive	Ronald C. Nelson		
City Whitefish Bay	State Zip Code WI 53217-5371	Transaction ID: 20091008104013-61	
FEC ID number of contributing federal political committee.	C	18.00	
Name of Employer NML	Occupation Dir Prd Dev & Strat		
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 402.00		
		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 318 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	Statements may not be sold or used by any persone name and address of any political committee to note Company Federal PAC	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ronald C. Nelson Mailing Address 5275 N Lake Drive City Whitefish Bay FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary Other (specify)	State Zip Code WI 53217-5371 C Occupation Dir Prd Dev & Strat Aggregate Year-to-Date ▼ 402.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ronald C. Nelson Mailing Address 5275 N Lake Drive City Whitefish Bay FEC ID number of contributing federal political committee. Name of Employer NML	State Zip Code WI 53217-5371 C Occupation Dir Prd Dev & Strat	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Ronald C. Nelson Mailing Address 5275 N Lake Drive City Whitefish Bay FEC ID number of contributing federal political committee.	Aggregate Year-to-Date ▼ 402.00 State Zip Code WI 53217-5371	Date of Receipt M
Name of Employer NML Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	Occupation Dir Prd Dev & Strat Aggregate Year-to-Date 402.00	54.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 319 / 574 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	Statements may not be sold or used by any personal name and address of any political committee to the Company Federal PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Timothy Nelson Mailing Address 3518 17th Street City Kenosha FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53144-3339 C Occupation Dir Mkt Conduct Aggregate Year-to-Date ▼ 273.00	Date of Receipt M M M / D D / Y Y Y Y Y O 8 3 1 2 0 0 9 Transaction ID: 20090902-959-15-1 Amount of Each Receipt this Period 13.00
Full Name (Last, First, Middle Initial) Timothy Nelson Mailing Address 3518 17th Street City Kenosha FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53144-3339 C Occupation Dir Mkt Conduct Aggregate Year-to-Date 273.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Timothy Nelson Mailing Address 3518 17th Street City Kenosha FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53144-3339 C Occupation Dir Mkt Conduct Aggregate Year-to-Date ▼ 273.00	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)		39.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 320 / 574 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	Statements may not be sold or used by any persone name and address of any political committee to note Company Federal PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Timothy Nelson Mailing Address 3518 17th Street City Kenosha FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary Other (specify)	State Zip Code WI 53144-3339 C Occupation Dir Mkt Conduct Aggregate Year-to-Date 273.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Timothy Nelson Mailing Address 3518 17th Street City Kenosha FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53144-3339 C Occupation Dir Mkt Conduct Aggregate Year-to-Date 273.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Timothy Nelson Mailing Address 3518 17th Street City Kenosha FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53144-3339 C Occupation Dir Mkt Conduct Aggregate Year-to-Date 273.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		39.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 321 / 5 / 4 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	rance Company	Federal PAC	
Full Name (Last, First, Middle Initial) James J Nemec			Date of Receipt
Mailing Address 22 Maple Avenue	07 15 2009		
City <u>Larchmont</u>	State NY	Zip Code 10538-4041	Transaction ID: 20090720-1244-13-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		208.00
Name of Employer The Nemec Agency LLC	Occupatio Special A		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4368.00	
Full Name (Last, First, Middle Initial) James J Nemec			Date of Receipt
Mailing Address 22 Maple Avenue	0 7 3 1 2 0 0 9		
City Larchmont	State NY	Zip Code 10538-4041	Transaction ID: 20090804-1241-10- Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		208.00
Name of Employer The Nemec Agency LLC	Occupatio Special A		
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 4368.00	
Full Name (Last, First, Middle Initial) James J Nemec			Date of Receipt
Mailing Address 22 Maple Avenue	0 8 1 5 2 0 0 9		
City Larchmont	State	Zip Code	Transaction ID: 20090819-66-14-0
FEC ID number of contributing federal political committee.	NY 10538-4041		Amount of Each Receipt this Period 208.00
Name of Employer The Nemec Agency LLC Special A			
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 4368.00	
SUBTOTAL of Receipts This Page (options	al)		624.00

	EDULE A (FEC Form 3X IZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 322 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16
NAN	ormation copied from such Reports and commercial purposes, other than using the OF COMMITTEE (In Full) Protection Methods Northwestern Mutual Life Insura			on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Jame	Name (Last, First, Middle Initial) es J Nemec			Date of Receipt
City	ing Address 22 Maple Avenue	State NY	Zip Code 10538-4041	Transaction ID: 20090902-66-14-46 Amount of Each Receipt this Period
FEC	ID number of contributing ral political committee.	C		208.00
The	eipt For: Primary Other (specify)	Occupation Special A Aggregate		
Jame	Name (Last, First, Middle Initial) es J Nemec ing Address 22 Maple Avenue	Date of Receipt 0 9 1 5 2 0 0 9		
City		State	Zip Code	Transaction ID: 20090921-72-16-16
FEC	chmont ID number of contributing ral political committee.	C	10538-4041	Amount of Each Receipt this Period 208.00
Nam The	f Employer Occupat mec Agency LLC Special			
Rece	eipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 4368.00	
	Name (Last, First, Middle Initial) es J Nemec			Date of Receipt
Maili	ing Address 22 Maple Avenue	09 30 / Y Y Y Y Y Y		
City	chmont	State NY	Zip Code 10538-4041	Transaction ID: 20091008103448-72 Amount of Each Receipt this Period
FEC	ID number of contributing ral political committee.	C	10000 4041	208.00
Nam The	Name of Employer The Nemec Agency LLC Special A			
Reco	eipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 4368.00	
SUBTO	OTAL of Receipts This Page (optional)	<u> </u>		624.00

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule for each category of the Detailed Summary Page	e (check only one)
NAME OF COMMITTEE (In Full)		ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
The Northwestern Mutual Life Insuran	ce Company Federal PAC	
Full Name (Last, First, Middle Initial) James J Nemec		Date of Receipt
Mailing Address 22 Maple Avenue	10 15 2009	
City	State Zip Code	Transaction ID: 2009102293957-72
Larchmont	NY 10538-4041	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	208.00
Name of Employer The Nemec Agency LLC	Occupation Special Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	4368.0	00
Full Name (Last, First, Middle Initial) James J Nemec	Date of Receipt	
Mailing Address 22 Maple Avenue	10 31 2009	
City	State Zip Code	Transaction ID: 20091105152043-7
Larchmont	NY 10538-4041	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	208.00
Name of Employer The Nemec Agency LLC	Occupation Special Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	4368.0	00
Full Name (Last, First, Middle Initial) James J Nemec	Date of Receipt	
Mailing Address 22 Maple Avenue		11 15 2009
City	State Zip Code	Transaction ID: 20091118163132-7
Larchmont	NY 10538-4041	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	208.00
Name of Employer The Nemec Agency LLC	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4368.0	00
SUBTOTAL of Receipts This Page (optional)		624.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 324 / 574 (check only one)
Any information copied from such Reports or for commercial purposes, other than usi	and Statements may	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	urance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Jeremy D. Newman			Date of Receipt
Mailing Address 2456 N 97th Stre	0 7 1 5 2 0 0 9		
City Wauwatosa	State WI	Zip Code 53226-1646	Transaction ID: 20090720-1133-13-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer NML	Occupation Dir Corp		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 396.00	
Full Name (Last, First, Middle Initial) Jeremy D. Newman	I		Date of Receipt
Mailing Address 2456 N 97th Stre	0 7 3 1 Y Y Y Y Y Y		
City Wauwatosa	State WI	Zip Code 53226-1646	Transaction ID: 20090804-1131-10-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer NML	Occupation Dir Corp		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 396.00	
Full Name (Last, First, Middle Initial) Jeremy D. Newman			Date of Receipt
Mailing Address 1140 Lone Tree Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Elm Grove	State WI	Zip Code 53122-2019	Transaction ID: 20090819-1197-14-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00122 2010	20.00
Name of Employer NML Occupation Dir Corp			7
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 396.00	
SUBTOTAL of Receipts This Page (option	nal)		60.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 325 / 574 (check only one) X
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
) A.	Full Name (Last, First, Middle Initial) Jeremy D. Newman		,	Date of Receipt
	Mailing Address 1140 Lone Tree Road City	State	Zip Code	0 8 3 1 2 0 0 9 Transaction ID: 20090902-1197-15-1
	Elm Grove FEC ID number of contributing federal political committee.	C	53122-2019	Amount of Each Receipt this Period 20.00
	Name of Employer NML Receipt For: Primary General	Occupation Dir Corp		
-	Other (specify) Full Name (Last, First, Middle Initial)	0 0	396.00	
B.	Jeremy D. Newman Mailing Address 1140 Lone Tree Road			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20090921-1186-17-1
	Elm Grove FEC ID number of contributing federal political committee.	C	53122-2019	Amount of Each Receipt this Period 20.00
	Name of Employer NML	Occupation Dir Corp		
	Receipt For: Primary General Other (specify) ▼	, '	e Year-to-Date ▼ 396.00	
с. С.	Full Name (Last, First, Middle Initial) Jeremy D. Newman			Date of Receipt
	Mailing Address 1140 Lone Tree Road			09 30 2009
	City Elm Grove	State WI	Zip Code 53122-2019	Transaction ID: 20091008104013-1113 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer NML	Occupation Dir Corp		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 396.00	
	SUBTOTAL of Receipts This Page (optional) .			60.00
	TOTAL This Period (last page this line number	r only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 326 / 574 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insural	Statements may not be sold or used by any persone name and address of any political committee to noce Company Federal PAC	
Full Name (Last, First, Middle Initial) Jeremy D. Newman Mailing Address 1140 Lone Tree Road City Elm Grove FEC ID number of contributing	State Zip Code WI 53122-2019	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
rec in humber of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation Dir Corp Offices Aggregate Year-to-Date 396.00	20.00
Full Name (Last, First, Middle Initial) Jeremy D. Newman Mailing Address 1140 Lone Tree Road City Elm Grove	State Zip Code WI 53122-2019	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	Occupation Dir Corp Offices Aggregate Year-to-Date 396.00	20.00
Full Name (Last, First, Middle Initial) Jeremy D. Newman Mailing Address 1140 Lone Tree Road City Elm Grove FEC ID number of contributing	State Zip Code WI 53122-2019	Date of Receipt M
Receipt For: Primary Other (specify)	Occupation Dir Corp Offices Aggregate Year-to-Date 396.00	
SUBTOTAL of Receipts This Page (optional)	•	60.00

	LE A (FEC Form 3X) O RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 327 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any informatio or for commerce	n copied from such Reports and cial purposes, other than using th	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	COMMITTEE (In Full) nwestern Mutual Life Insurar	nce Company	Federal PAC	
Full Name ((Last, First, Middle Initial) Norton			Date of Receipt
Mailing Add	dress 10145 Wavell Road			07 15 2009
City Fairfax		State VA	Zip Code 22032-2337	Transaction ID: 20090720-546-13-0
FEC ID nur	mber of contributing tical committee.	C	22032-2331	Amount of Each Receipt this Period 50.00
Name of Er NML	mployer	Occupatio Regional		
Receipt For Prima Other		, '	e Year-to-Date ▼ 1050.00	
B. William H. N				Date of Receipt
Mailing Add	dress 10145 Wavell Road	07 31 2009		
City		State	Zip Code	Transaction ID: 20090804-546-10-0
<u>Fairfax</u>		VA	22032-2337	Amount of Each Receipt this Period
	mber of contributing tical committee.	C		50.00
Name of Er NML	mployer	Occupatio Regional	n Director	
Receipt For Prima Other		Aggregate	e Year-to-Date ▼ 1050.00	
Full Name ((Last, First, Middle Initial) Norton			Date of Receipt
Mailing Add	dress 10145 Wavell Road			0 8 1 5 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: 20090819-614-14-15
	mber of contributing tical committee.	C	22032-2337	Amount of Each Receipt this Period 50.00
Name of Er NML	mployer	Occupatio Regional	n Director	
Receipt For Prima Other		- 	e Year-to-Date ▼ 1050.00	
SUBTOTAL	of Receipts This Page (optional) .			150.00
	Period (last page this line number			

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 328 / 574 (check only one) X
<i>A</i>	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma le name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insurar	nce Company	/ Federal PAC	
۱.	Full Name (Last, First, Middle Initial) William H. Norton			Date of Receipt
	Mailing Address 10145 Wavell Road			08 / 31 / 2009
	City	State VA	Zip Code	Transaction ID: 20090902-614-15-1
	Fairfax FEC ID number of contributing federal political committee.	C	22032-2337	Amount of Each Receipt this Period 50.00
	Name of Employer NML	Occupation	n I Director	
	Receipt For: Primary General Other (specify) ▼	_ ' _ <u>`</u> _	e Year-to-Date ▼ 1050.00	
_	Full Name (Last, First, Middle Initial) William H. Norton	<u> </u>		Date of Receipt
	Mailing Address 10145 Wavell Road	09 15 Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 20090921-612-17-1
	<u>Fairfax</u>	VA	22032-2337	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer NML	Occupation Regional	n I Director	
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼		1050.00	
_	Full Name (Last, First, Middle Initial) William H. Norton			Date of Receipt
	Mailing Address 10145 Wavell Road			09 30 Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20091008104013-538
	<u>Fairfax</u>	VA	22032-2337	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer NML	_ 	Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1050.00	
Γ	SUBTOTAL of Receipts This Page (optional)	•		150.00

ITEMIZED RECEIPTS	A)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 329 / 574 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may g the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	rance Company	Federal PAC	
Full Name (Last, First, Middle Initial) William H. Norton			Date of Receipt
Mailing Address 10145 Wavell Roa	d		10 15 2009
City <u>Fairfax</u>	State VA	Zip Code 22032-2337	Transaction ID: 20091015164625-537 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer NML	Occupation Regional		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1050.00	
Full Name (Last, First, Middle Initial) William H. Norton			Date of Receipt
Mailing Address 10145 Wavell Roa	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Fairfax	State VA	Zip Code 22032-2337	Transaction ID: 20091105152628-53 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer NML	Occupation Regional		
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼	
Full Name (Last, First, Middle Initial) William H. Norton			Date of Receipt
Mailing Address 10145 Wavell Roa	d		M M / D D / Y Y Y Y Y 1 1 1 5 2 0 0 9
City Fairfax	State VA	Zip Code 22032-2337	Transaction ID: 2009111816423-538 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	22002 2007	50.00
Name of Employer NML	Occupation Regional		
Receipt For: Primary General Other (specify) ▼	- '	Year-to-Date ▼ 1050.00	
SUBTOTAL of Receipts This Page (options	al)		150.00

Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Daniel J. O Meara Mailing Address W70 N385 Fox Pointe City Cedarburg FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Daniel J. O Meara Mailing Address W70 N385 Fox Pointe C. Full Name (Last, First, Middle Initial) Daniel J. O Meara Mailing Address W70 N385 Fox Pointe City Cedarburg FEC ID number of contributing federal political committee. C. Name of Employer NML C. C. C. C. C. C. C. C. C. C	ddress of any political committee to	Date of Receipt O 7			
The Northwestern Mutual Life Insurance Comparing A. Pull Name (Last, First, Middle Initial) Daniel J. O Meara Mailing Address W70 N385 Fox Pointe City State Cedarburg WI FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Daniel J. O Meara Mailing Address W70 N385 Fox Pointe City State Cedarburg WI FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) C C Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) C C Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Daniel J. O Meara Mailing Address W70 N385 Fox Pointe City State Cedarburg FEC ID number of contributing federal political committee. C C Name of Employer NML Name of Employer NML C C Name of Employer NML C C Name of Employer NML Occupa NML	Zip Code	07 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
A. Daniel J. O Meara Mailing Address W70 N385 Fox Pointe City State Cedarburg WI FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Daniel J. O Meara Mailing Address W70 N385 Fox Pointe City State Cedarburg WI FEC ID number of contributing federal political committee. Name of Employer NML C. Daniel J. O Meara Mailing Address W70 N385 Fox Pointe City State Cedarburg C Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Daniel J. O Meara Mailing Address W70 N385 Fox Pointe City General City State Cedarburg WI FEC ID number of contributing federal political committee. City Cedarburg WI FEC ID number of contributing federal political committee. City Cedarburg WI FEC ID number of contributing federal political committee. Name of Employer NML Occupa	•	07 15 2009			
City Cedarburg WI FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Daniel J. O Meara Mailing Address W70 N385 Fox Pointe City State Cedarburg WI FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Occupative Aggree VP Aggree Other (specify) ▼ Full Name (Last, First, Middle Initial) Daniel J. O Meara Mailing Address W70 N385 Fox Pointe C. Daniel J. O Meara Mailing Address W70 N385 Fox Pointe City General Other (specify) ▼ Full Name (Last, First, Middle Initial) Daniel J. O Meara Mailing Address W70 N385 Fox Pointe City State Cedarburg WI FEC ID number of contributing federal political committee. Name of Employer NML Name of Employer Occupative NML Occupative Aggree Contributing federal political committee. Name of Employer NML Occupative NI Cocupative NI C	•	07 15 2009			
Tec ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Daniel J. O Meara Mailing Address W70 N385 Fox Pointe City State Cedarburg WI FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Daniel J. O Meara Mailing Address W70 N385 Fox Pointe C. Full Name (Last, First, Middle Initial) Daniel J. O Meara Mailing Address W70 N385 Fox Pointe City State Cedarburg WI FEC ID number of contributing federal political committee. City State Cedarburg WI FEC ID number of contributing federal political committee. Name of Employer NML Name of Employer NML Occupative Aggree Aggree Cocupative Aggree Occupative A	•				
FEC ID number of contributing federal political committee. Name of Employer NML Receipt For:		Amount of Each Receipt this Period			
Receipt For: Primary		27.00			
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Daniel J. O Meara Mailing Address W70 N385 Fox Pointe City State Cedarburg WI FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Daniel J. O Meara Mailing Address W70 N385 Fox Pointe City Cedarburg FEC ID number of contributing federal political committee. City Cedarburg FEC ID number of contributing federal political committee. Name of Employer NML Ccupary VP Ag	ion ncy Dev & Prgrms				
B. Daniel J. O Meara Mailing Address W70 N385 Fox Pointe City State Cedarburg WI FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Daniel J. O Meara Mailing Address W70 N385 Fox Pointe City State Cedarburg WI FEC ID number of contributing federal political committee. Name of Employer NML Cuty Cedarburg Cedarburg WI FEC ID number of contributing federal political committee. Name of Employer NML Occupation Occupation Cedarburg Ceda	ate Year-to-Date ▼ 567.00				
City Cedarburg FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary Other (specify) Other (specify) Full Name (Last, First, Middle Initial) Daniel J. O Meara Mailing Address W70 N385 Fox Pointe City Cedarburg FEC ID number of contributing federal political committee. Name of Employer NML Ccupa	Daniel J. O Meara				
Cedarburg FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Daniel J. O Meara Mailing Address W70 N385 Fox Pointe City State Cedarburg WI FEC ID number of contributing federal political committee. Name of Employer NML Name of Employer NML C C C C C C C C C C C C C		07 31 2009			
FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Daniel J. O Meara Mailing Address W70 N385 Fox Pointe City State Cedarburg WI FEC ID number of contributing federal political committee. Name of Employer NML Cuty Coccupation Coccupation (Coccupation) Name of Employer NML Coccupation Coccupation (Coccupation) Occupation (Coccupation) Occupation (Coccupation) Name of Employer NML	Zip Code	Transaction ID: 20090804-739-10-0			
Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Daniel J. O Meara Mailing Address W70 N385 Fox Pointe City State Cedarburg WI FEC ID number of contributing federal political committee. Name of Employer NML VP Ag Aggrect	53012	Amount of Each Receipt this Period 27.00			
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Daniel J. O Meara Mailing Address W70 N385 Fox Pointe City State Cedarburg WI FEC ID number of contributing federal political committee. Name of Employer NML Occupa	ion ncy Dev & Prgrms				
Daniel J. O Meara Mailing Address W70 N385 Fox Pointe City State Cedarburg WI FEC ID number of contributing federal political committee. Name of Employer NML Occupa	ate Year-to-Date ▼ 567.00				
City State Cedarburg WI FEC ID number of contributing federal political committee. Name of Employer NML Occupa					
Cedarburg WI FEC ID number of contributing federal political committee. Name of Employer NML Occupa	Mailing Address W70 N385 Fox Pointe				
FEC ID number of contributing federal political committee. Name of Employer NML Occupa	Zip Code	Transaction ID: 20090819-806-14-15 Amount of Each Receipt this Period			
	53012	27.00			
Receipt For: Aggred	53012				
Primary General Other (specify) ▼					
SUBTOTAL of Receipts This Page (optional)	ion				

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 331 / 574 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	rance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Daniel J. O Meara			Date of Receipt
Mailing Address W70 N385 Fox Poin	nte		08 31 2009
City Cedarburg	State WI	Zip Code 53012	Transaction ID: 20090902-806-15-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		27.00
Name of Employer NML	Occupation VP Agno	n y Dev & Prgrms	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 567.00	
Full Name (Last, First, Middle Initial) Daniel J. O Meara			Date of Receipt
Mailing Address W70 N385 Fox Poil	0 9 1 5 2 0 0 9		
City Cedarburg	State WI	Zip Code 53012	Transaction ID: 20090921-801-17-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		27.00
Name of Employer NML	Occupation VP Agno	n y Dev & Prgrms	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 567.00	
Full Name (Last, First, Middle Initial) Daniel J. O Meara			Date of Receipt
Mailing Address W70 N385 Fox Poin	nte		09 30 2009
City Cedarburg	State WI	Zip Code 53012	Transaction ID: 20091008104013-72 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33012	27.00
Name of Employer NML	Occupation VP Agno	n y Dev & Prgrms	7
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 567.00	
SUBTOTAL of Receipts This Page (optional	I SI)		81.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 332 / 574 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	and Statements may not be sold or used by any person g the name and address of any political committee to urance Company Federal PAC	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Daniel J. O Meara Mailing Address W70 N385 Fox Po	into	Date of Receipt
City Cedarburg FEC ID number of contributing	State Zip Code WI 53012	Transaction ID: 20091015164625-727 Amount of Each Receipt this Period 27.00
Receipt For: Primary Other (specify)	Occupation VP Agncy Dev & Prgrms Aggregate Year-to-Date ▼ 567.00	27.00
Full Name (Last, First, Middle Initial) Daniel J. O Meara Mailing Address W70 N385 Fox Po	pinte	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Cedarburg FEC ID number of contributing	State Zip Code WI 53012	Transaction ID: 20091105152628-727 Amount of Each Receipt this Period 27.00
Name of Employer NML Receipt For: Primary General	Occupation VP Agncy Dev & Prgrms Aggregate Year-to-Date ▼	
Other (specify) Full Name (Last, First, Middle Initial) Daniel J. O Meara	567.00	Date of Receipt
Mailing Address W70 N385 Fox Po		1 1 1 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Cedarburg FEC ID number of contributing federal political committee.	State Zip Code WI 53012	Transaction ID: 2009111816423-727 Amount of Each Receipt this Period 27.00
Name of Employer NML	Occupation VP Agncy Dev & Prgrms	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 567.00	
SUBTOTAL of Receipts This Page (option	al)	81.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 333 / 574 (check only one) X
,	Any information copied from such Reports and or for commercial purposes, other than using the	Statements mag ne name and add	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insural	nce Company	Federal PAC	
Α.	Full Name (Last, First, Middle Initial) John K. O Meara			Date of Receipt
	Mailing Address 1083 N Perry Court			08 / 15 / 2009
	City Wauwatosa	State WI	Zip Code 53213-3158	Transaction ID: 20090819-1115-14-15 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		14.00
	Name of Employer NML	Occupatio Dir Adv F		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 294.00	
_ 3.	Full Name (Last, First, Middle Initial) John K. O Meara			Date of Receipt
	Mailing Address 1083 N Perry Court		08 31 2009	
	City	State	Zip Code	Transaction ID: 20090902-1115-15-1
	Wauwatosa	WI	53213-3158	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		14.00
	Name of Employer NML	Occupatio Dir Adv F		
	Receipt For:	Aggregate	e Year-to-Date V	
	Primary General Other (specify) ▼		294.00	
_).	Full Name (Last, First, Middle Initial) John K. O Meara			Date of Receipt
	Mailing Address 1083 N Perry Court			0 9 1 5 2 0 0 9
	City	State W1	Zip Code	Transaction ID: 20090921-1106-17-1
	Wauwatosa FEC ID number of contributing federal political committee.	C	53213-3158	Amount of Each Receipt this Period 14.00
	Name of Employer NML	Occupatio Dir Adv F		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 294.00	
	SUBTOTAL of Receipts This Page (optional)			42.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 334 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ice Company	/ Federal PAC	
Δ. Α.	Full Name (Last, First, Middle Initial) John K. O Meara			Date of Receipt
	Mailing Address 1083 N Perry Court			09 30 2009
	City <u>Wauwatosa</u>	State WI	Zip Code 53213-3158	Transaction ID: 20091008104013-1033 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		14.00
	Name of Employer NML	Occupatio Dir Adv F		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 294.00	
- В.	Full Name (Last, First, Middle Initial) John K. O Meara			Date of Receipt
	Mailing Address 1083 N Perry Court			10 15 2009
	City	State	Zip Code	Transaction ID: 20091015164625-1032
	Wauwatosa	WI	53213-3158	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		14.00
	Name of Employer NML	Occupatio Dir Adv F		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		294.00	
с. С.	Full Name (Last, First, Middle Initial) John K. O Meara			Date of Receipt
	Mailing Address 1083 N Perry Court			10 31 2009
	City	State WI	Zip Code	Transaction ID: 20091105152628-1032
	Wauwatosa FEC ID number of contributing federal political committee.	C	53213-3158	Amount of Each Receipt this Period 14.00
	Name of Employer NML	Occupatio Dir Adv F		
	Receipt For: Primary General Other (specify) ▼	, '	e Year-to-Date ▼ 294.00	
	SUBTOTAL of Receipts This Page (optional) .	<u> </u>		42.00
-	TOTAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 335 / 574 (check only one) X
,	Any information copied from such Reports and sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	ice Company	Federal PAC	
۷.	Full Name (Last, First, Middle Initial) John K. O Meara			Date of Receipt
	Mailing Address 1083 N Perry Court			11 1 15 2009
	City <u>Wauwatosa</u>	State WI	Zip Code 53213-3158	Transaction ID: 2009111816423-1031 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		14.00
	Name of Employer NML	Occupatio Dir Adv F		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 294.00	
_ 3.	Full Name (Last, First, Middle Initial) Mary Joy O Meara	Date of Receipt		
	Mailing Address 4325 N Morris Boulev	09 30 2009		
	City	State	Zip Code	Transaction ID: 20091008104013-751
	Shorewood	WI	53211-1547	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		13.00
	Name of Employer NML	Occupatio Dir Spec	n ialty Mkts	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		249.00	
-).	Full Name (Last, First, Middle Initial) Mary Joy O Meara			Date of Receipt
	Mailing Address 4325 N Morris Boulev	ard		10 15 2009
	City	State	Zip Code	Transaction ID: 20091015164625-750
	Shorewood FEC ID number of contributing federal political committee.	C	53211-1547	Amount of Each Receipt this Period 13.00
	Name of Employer NML	Occupatio Dir Spec	n ialty Mkts	
	Receipt For: Primary General Other (specify) ▼	, ' 	e Year-to-Date ▼ 249.00	
Γ		1		40.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 336 / 574 (check only one) X
	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insurar	ice Company	/ Federal PAC	
∠ A.	Full Name (Last, First, Middle Initial) Mary Joy O Meara			Date of Receipt
	Mailing Address 4325 N Morris Boulev	10 31 2009		
	City	State	Zip Code	Transaction ID: 20091105152628-750
	Shorewood	WI	53211-1547	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		13.00
	Name of Employer NML	Occupation Dir Spec	on ialty Mkts	
	Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	e Year-to-Date ▼ 249.00	
- В.	Full Name (Last, First, Middle Initial) Mary Joy O Meara			Date of Receipt
	Mailing Address 4325 N Morris Boulev	11 15 2009		
	City	State	Zip Code	Transaction ID: 2009111816423-750
	Shorewood	WI	53211-1547	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		13.00
	Name of Employer NML	Occupation Dir Spec	on ialty Mkts	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		249.00	
_ C.	Full Name (Last, First, Middle Initial) Gregory C. Oberland			Date of Receipt
	Mailing Address 4746 N Cumberland E	07 15 2009		
	City	State	Zip Code	Transaction ID: 20090720-606-13-0
	Whitefish Bay	WI	53211-1147	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.00
	Name of Employer NML	Occupation EVP Ins		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 4368.00	
	SUBTOTAL of Receipts This Page (optional) .			234.00
f	TOTAL This Period (last page this line number			

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 337 / 574 (check only one) X
A 0	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements man	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions
	The Northwestern Mutual Life Insura	nce Company	Federal PAC	
	Full Name (Last, First, Middle Initial) Gregory C. Oberland Mailing Address 4746 N Cumberland	DI		Date of Receipt
				07 31 2009
	City Whitefish Bay	State WI	Zip Code 53211-1147	Transaction ID: 20090804-606-10-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	OOZII III	208.00
	Name of Employer NML	Occupatio EVP Ins		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4368.00	
_	Full Name (Last, First, Middle Initial) Gregory C. Oberland			Date of Receipt
	Mailing Address 4746 N Cumberland	BI		08 15 YYYY 2009
	City	State	Zip Code	Transaction ID: 20090819-673-14-15
	Whitefish Bay	WI	53211-1147	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		208.00
	Name of Employer NML	Occupatio FVP Ins		
	Receipt For:		e Year-to-Date V	
	Primary General Other (specify) ▼		4368.00	
_	Full Name (Last, First, Middle Initial) Gregory C. Oberland			Date of Receipt
	Mailing Address 4746 N Cumberland	BI		08 31 Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20090902-673-15-1
	Whitefish Bay	WI	53211-1147	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.00
	Name of Employer NML	Occupatio EVP Ins		
	Receipt For: Primary General Other (specify) ▼	-, '	e Year-to-Date ▼ 4368.00	
Γ,	SUBTOTAL of Receipts This Page (optional)			624.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 338 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
(Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	ne name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Gregory C. Oberland			Date of Receipt
	Mailing Address 4746 N Cumberland	BI State	Zip Code	0 9 1 5 20000021 670 17 1
	City Whitefish Bay	WI	53211-1147	Transaction ID: 20090921-670-17-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.00
	Name of Employer NML	Occupation EVP Ins		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4368.00	
– В.	Full Name (Last, First, Middle Initial) Gregory C. Oberland			Date of Receipt
	Mailing Address 4746 N Cumberland	BI		09 30 2009
	City	State	Zip Code	Transaction ID: 20091008104013-596
	Whitefish Bay	WI	53211-1147	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.00
	Name of Employer NML	Occupation EVP Ins		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4368.00	
_ C.	Full Name (Last, First, Middle Initial) Gregory C. Oberland			Date of Receipt
	Mailing Address 4746 N Cumberland			10 / 15 / Y Y Y Y Y Y Y
	City Whitefish Bay	State WI	Zip Code 53211-1147	Transaction ID: 20091015164625-595 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	002111147	208.00
	Name of Employer NML	Occupation EVP Ins		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4368.00	
	SUBTOTAL of Receipts This Page (optional)			624.00
T	TOTAL This Period (last page this line number	er only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 339 / 574 (check only one) X
,	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	/ Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Gregory C. Oberland			Date of Receipt
	Mailing Address 4746 N Cumberland E	3I 		10 31 7 2009
	City Whitefish Bay	State WI	Zip Code 53211-1147	Transaction ID: 20091105152628-595 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.00
	Name of Employer NML	Occupation EVP Ins		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4368.00	
– В.	Full Name (Last, First, Middle Initial) Gregory C. Oberland Mailing Address 4746 N. Curph and and I			Date of Receipt
	Mailing Address 4746 N Cumberland E	<u> </u>		111 15 2009
	City Whitefish Bay	State WI	Zip Code 53211-1147	Transaction ID: 2009111816423-596 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00211117	208.00
	Name of Employer NML	Occupation EVP Ins		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4368.00	
_ C.	Full Name (Last, First, Middle Initial) Eric S Olson	1		Date of Receipt
	Mailing Address 127 Fairmount Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Ridgewood	State NJ	Zip Code 07450-1422	Transaction ID: 20091118163132-57
	FEC ID number of contributing federal political committee.	C	07430-1422	Amount of Each Receipt this Period 42.00
	Name of Employer Olson Fncl Grp LLC	Occupation Special /		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 210.00	
	SUBTOTAL of Receipts This Page (optional) .			458.00
t	TOTAL This Period (last page this line number		<u> </u>	

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 340 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for cor	mmercial purposes, other than using the OF COMMITTEE (In Full)	name and ad	dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
The	Northwestern Mutual Life Insuranc	e Company	Federal PAC	
	lame (Last, First, Middle Initial) een A. Oman			Date of Receipt
Mailin	g Address S63W16495 College A	venue		07 15 2009
City		State	Zip Code	Transaction ID: 20090720-769-13-0
<u>Musl</u>	kego	WI	53150-8303	Amount of Each Receipt this Period
	D number of contributing al political committee.	С		52.00
Name NML	e of Employer	Occupatio VP Pos	n	
	pt For: Primary General	Aggregate	e Year-to-Date ▼ 1092.00	1
	Other (specify)	0 0	1092.00	
	lame (Last, First, Middle Initial) een A. Oman			Date of Receipt
	g Address S63W16495 College A	venue		0 7 3 1 2 0 0 9
City		State	Zip Code	Transaction ID: 20090804-768-10-0
<u>Musl</u>	Kego .	WI	53150-8303	Amount of Each Receipt this Period
	D number of contributing al political committee.	C		52.00
Name NML	e of Employer	Occupatio VP Pos	n	
	pt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1092.00	
	lame (Last, First, Middle Initial) een A. Oman			Date of Receipt
Mailin	g Address S63W16495 College A	venue		08 15 2009
City		State	Zip Code	Transaction ID: 20090819-835-14-15
<u>Musl</u>	kego	WI	53150-8303	Amount of Each Receipt this Period
federa	D number of contributing al political committee.	C		52.00
Name NML	e of Employer	Occupatio VP Pos	n	
	pt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1092.00	
SUBTO	TAL of Receipts This Page (optional)			156.00
	This Period (last page this line number			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 341 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
) A .	Full Name (Last, First, Middle Initial) Kathleen A. Oman			Date of Receipt
	Mailing Address S63W16495 College A	Avenue State	Zip Code	0 8 3 1 2 0 0 9 Transaction ID: 20090902-835-15-1
	Muskego FEC ID number of contributing	WI C	53150-8303	Amount of Each Receipt this Period 52.00
	federal political committee. Name of Employer NML	Occupation VP Pos	on .	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1092.00	
В.	Full Name (Last, First, Middle Initial) Kathleen A. Oman Mailing Address S63W16495 College A	Avenue		Date of Receipt 0 9 1 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 20090921-830-17-1
	Muskego FEC ID number of contributing federal political committee.	C	53150-8303	Amount of Each Receipt this Period 52.00
	Name of Employer NML	Occupation VP Pos	on	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1092.00	
C.	Full Name (Last, First, Middle Initial) Kathleen A. Oman Mailing Address S63W16495 College A	Avenue		Date of Receipt 0 9 3 0 2 0 0 9
	City Muskego	State WI	Zip Code 53150-8303	Transaction ID: 20091008104013-757
	FEC ID number of contributing federal political committee.	C	33130-0303	Amount of Each Receipt this Period 52.00
	Name of Employer NML	Occupation VP Pos	on	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1092.00	
	SUBTOTAL of Receipts This Page (optional))	156.00
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Statamenta ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 342 / 574 (check only one) X
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and ad	dress of any political committee to	or solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Kathleen A. Oman			Date of Receipt
A.	Mailing Address S63W16495 College	Avenue		1 0 1 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 20091015164625-756
	Muskego	WI	53150-8303	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		52.00
	Name of Employer NML	Occupation VP Pos	on	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1092.00	
- В.	Full Name (Last, First, Middle Initial) Kathleen A. Oman			Date of Receipt
	Mailing Address S63W16495 College	Avenue		10 31 2009
	City	State	Zip Code	Transaction ID: 20091105152628-756
	Muskego	WI	53150-8303	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		52.00
	Name of Employer NML	Occupation VP Pos	on	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1092.00	
- С.	Full Name (Last, First, Middle Initial) Kathleen A. Oman			Date of Receipt
	Mailing Address S63W16495 College	Avenue		1 1 1 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 2009111816423-756
	Muskego	WI	53150-8303	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		52.00
	Name of Employer NML	Occupation VP Pos	on	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1092.00	
	SUBTOTAL of Receipts This Page (optional) .	1		156.00
	TOTAL This Period (last page this line number	r only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 343 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	e name and ad	dress of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
2	Full Name (Last, First, Middle Initial)		y rederal FAC	
Α.	Christen L. Partleton Mailing Address 4832 N Shoreland Av	enue		Date of Receipt 0 7 1 5 2 0 0 9
	City Whitefish Bay	State WI	Zip Code 53217-5821	Transaction ID: 20090720-882-13-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		22.00
	Name of Employer NML	Occupation VP Facil		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 462.00	
- В.	Full Name (Last, First, Middle Initial) Christen L. Partleton Mailing Address 4832 N Shoreland Av	enue		Date of Receipt
	City	State	Zip Code	0 7 3 1 2 0 0 9 Transaction ID: 20090804-880-10-0
	Whitefish Bay FEC ID number of contributing	WI	53217-5821	Amount of Each Receipt this Period 22.00
	federal political committee.	C		22.00
	Name of Employer NML	Occupation VP Facil		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 462.00	
_ C.	Full Name (Last, First, Middle Initial) Christen L. Partleton			Date of Receipt
	Mailing Address 4832 N Shoreland Av	enue		08 15 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Whitefish Bay	State WI	Zip Code 53217-5821	Transaction ID: 20090819-947-14-15 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		22.00
	Name of Employer NML	Occupation VP Facil		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 462.00	
	SUBTOTAL of Receipts This Page (optional) .	1		66.00
t	TOTAL This Period (last page this line numbe			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 344 / 574 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	Statements may not be sold or used by any personal statements and address of any political committee to the Company Federal PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Christen L. Partleton Mailing Address 4832 N Shoreland Av City Whitefish Bay FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53217-5821 C Occupation VP Facility Ops Aggregate Year-to-Date 462.00	Date of Receipt M M M / D D / Y Y Y Y Y O 8 3 1 2 0 0 9 Transaction ID: 20090902-947-15-1 Amount of Each Receipt this Period 22.00
Full Name (Last, First, Middle Initial) Christen L. Partleton Mailing Address 4832 N Shoreland Av City Whitefish Bay FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53217-5821 C Occupation VP Facility Ops Aggregate Year-to-Date 462.00	Date of Receipt M M M / D D / Y Y Y Y Y 1 5 2 0 0 9 Transaction ID: 20090921-942-17-1 Amount of Each Receipt this Period 22.00
Full Name (Last, First, Middle Initial) Christen L. Partleton Mailing Address 4832 N Shoreland Av City Whitefish Bay FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General	State Zip Code WI 53217-5821 C Occupation VP Facility Ops Aggregate Year-to-Date 462.00	Date of Receipt M
Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	0 0 0 0 0 0 0 0	66.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 345 / 574 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	Statements may not be sold or used by any person e name and address of any political committee to nce Company Federal PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Christen L. Partleton Mailing Address 4832 N Shoreland Av City Whitefish Bay FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	enue State Zip Code WI 53217-5821 C Occupation VP Facility Ops Aggregate Year-to-Date 462.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Christen L. Partleton Mailing Address 4832 N Shoreland Av City Whitefish Bay FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	enue State Zip Code WI 53217-5821 C Occupation VP Facility Ops Aggregate Year-to-Date 462.00	Date of Receipt M M D D 2009 Transaction ID: 20091105152628-868 Amount of Each Receipt this Period 22.00
Full Name (Last, First, Middle Initial) Christen L. Partleton Mailing Address 4832 N Shoreland Av City Whitefish Bay FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	enue State Zip Code WI 53217-5821 C Occupation VP Facility Ops Aggregate Year-to-Date 462.00	Date of Receipt M
SUBTOTAL of Receipts This Page (optional) .		66.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for	te separate schedule(s) each category of the etailed Summary Page	FOR LINE NUMBER: PAGE 346 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	e name and address	of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Jeffrey L Pawlowski Mailing Address 2519 Northwest Mars	den Place		Date of Receipt
City Portland		Zip Code 97229-9190	0 7
FEC ID number of contributing federal political committee.	C	0 0 0	125.00
Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼	Occupation General Insur Aggregate Year		
Full Name (Last, First, Middle Initial) William C. Pickering Mailing Address 1823 N 81st Street			Date of Receipt 0 9 1 5 2 0 0 9
City		Zip Code	Transaction ID: 20090921-1116-17-1
Wauwatosa FEC ID number of contributing federal political committee.	C	53213-2146	Amount of Each Receipt this Period 12.00
Name of Employer NML	Occupation Asst Gc & Ass	st Sec	
Receipt For: Primary General Other (specify) ▼	Aggregate Year	to-Date ▼ 252.00]
Full Name (Last, First, Middle Initial) William C. Pickering			Date of Receipt
Mailing Address 1823 N 81st Street			09 / 30 / 4 9 9
City <u>Wauwatosa</u>		Zip Code 53213-2146	Transaction ID: 20091008104013-1043 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1 1 1 1	12.00
Name of Employer NML	Occupation Asst Gc & Ass	st Sec	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-	to-Date ▼ 252.00	
SUBTOTAL of Receipts This Page (optional) .	•		149.00
TOTAL This Period (last page this line numbe	r only)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	fo	se separate schedule(s) r each category of the etailed Summary Page	FOR LINE NUMBER: PAGE 347 / 574 (check only one) X 11a 11b 11c 12
Ai	ny information copied from such Reports and for commercial purposes, other than using the	Statements may not le name and address	be sold or used by any perso of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company Fed	leral PAC	
_	Full Name (Last, First, Middle Initial) William C. Pickering			Date of Receipt
	Mailing Address 1823 N 81st Street		7: 0 1	10 15 2009
	City Wauwatosa		Zip Code 53213-2146	Transaction ID: 20091015164625-1049 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30210-2140	12.00
	Name of Employer NML	Occupation Asst Gc & As	st Sec	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year		
	Full Name (Last, First, Middle Initial) William C. Pickering			Date of Receipt
	Mailing Address 1823 N 81st Street			10 31 2009
	City		Zip Code	Transaction ID: 20091105152628-104
	Wauwatosa	WI	53213-2146	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.00
	Name of Employer NML	Occupation Asst Gc & As	st Sec	
	Receipt For:	Aggregate Year	r-to-Date ▼	
	Primary General Other (specify) ▼		252.00	
	Full Name (Last, First, Middle Initial) William C. Pickering			Date of Receipt
	Mailing Address 1823 N 81st Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 2009111816423-1041
	Wauwatosa	WI	53213-2146	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		12.00
	Name of Employer NML	Occupation Asst Gc & As	st Sec	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year	-to-Date ▼ 252.00	
	SUBTOTAL of Receipts This Page (optional)	•		36.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 348 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
0	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	e name and addre	ss of any political committee t	on for the purpose of soliciting contributions
∠ A .	Full Name (Last, First, Middle Initial) Harvey W. Pogoriler Mailing Address 9185 N Rexleigh Drive	e		Date of Receipt
	City Bayside	State WI	Zip Code 53217-1869	0 7 1 5 2 0 0 9 Transaction ID: 20090720-1090-13-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		24.00
	Name of Employer NML	Occupation Asst Gc & A	Asst Sec	
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 456.00	
- 3.	Full Name (Last, First, Middle Initial) Harvey W. Pogoriler Mailing Address 9185 N Rexleigh Drive	e		Date of Receipt 0 7 3 1 2 0 0 9
	City	State	Zip Code	Transaction ID: 20090804-1088-10-0
	Bayside FEC ID number of contributing federal political committee.	C	53217-1869	Amount of Each Receipt this Period 24.00
	Name of Employer NML	Occupation Asst Gc & A	Asst Sec	
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 456.00	
•	Full Name (Last, First, Middle Initial) Harvey W. Pogoriler Mailing Address 9185 N Rexleigh Drive	9		Date of Receipt 0 8 1 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 20090819-1154-14-15
	Bayside FEC ID number of contributing federal political committee.	C	53217-1869	Amount of Each Receipt this Period 24.00
	Name of Employer NML	Occupation Asst Gc & A	Asst Sec	
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 456.00	
	SUBTOTAL of Receipts This Page (optional) .			72.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 349 / 574 (check only one) X 11a
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	ly not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ice Company	y Federal PAC	
Δ.	Full Name (Last, First, Middle Initial) Harvey W. Pogoriler			Date of Receipt
	Mailing Address 9185 N Rexleigh Drive	9		08 31 7 2009
	City Bayside	State WI	Zip Code 53217-1869	Transaction ID: 20090902-1154-15-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		24.00
	Name of Employer NML	Occupation Asst Gc	on & Asst Sec	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 456.00	
- В.	Full Name (Last, First, Middle Initial) Harvey W. Pogoriler			Date of Receipt
	Mailing Address 9185 N Rexleigh Drive	09 15 2009		
	City Bayside	State WI	Zip Code 53217-1869	Transaction ID: 20090921-1144-17-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33217 1003	24.00
	Name of Employer NML	Occupation Asst Gc	on & Asst Sec	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 456.00	
с. С.	Full Name (Last, First, Middle Initial) Harvey W. Pogoriler			Date of Receipt
	Mailing Address 9185 N Rexleigh Drive	Э		09 30 7 2009
	City Bayside	State WI	Zip Code 53217-1869	Transaction ID: 20091008104013-1071
	FEC ID number of contributing federal political committee.	C	33217-1009	Amount of Each Receipt this Period 24.00
	Name of Employer NML	Occupation Asst Gc	on & Asst Sec	
	Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	, '	e Year-to-Date ▼ 456.00	
	SUBTOTAL of Receipts This Page (optional) .	1		72.00
f	TOTAL This Period (last page this line number	r only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 350 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements ma name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	e Company	/ Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Harvey W. Pogoriler			Date of Receipt
	Mailing Address 9185 N Rexleigh Drive			10 15 2009
	City	State	Zip Code	Transaction ID: 20091015164625-1069
	Bayside	WI	53217-1869	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		24.00
	Name of Employer NML	Occupation Asst Gc	on & Asst Sec	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	456.00	
- В.	Full Name (Last, First, Middle Initial) Harvey W. Pogoriler			Date of Receipt
	Mailing Address 9185 N Rexleigh Drive	10 31 YYYY 2009		
	City	State	Zip Code	Transaction ID: 20091105152628-1069
	Bayside	WI	53217-1869	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		24.00
	Name of Employer NML	Occupation Asst Gc	on & Asst Sec	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		456.00	
- C.	Full Name (Last, First, Middle Initial) Harvey W. Pogoriler			Date of Receipt
U .	Mailing Address 9185 N Rexleigh Drive			M M / D D / Y Y Y Y Y 1 1 1 1 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 2009111816423-1068
	Bayside	WI	53217-1869	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		24.00
	Name of Employer NML	Occupation Asst Gc	on & Asst Sec	7
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		456.00	
	CURTOTAL of Descripts This Dags (entional)			72.00
}	SUBTOTAL of Receipts This Page (optional)		<u> </u>	
	TOTAL This Period (last page this line number of	only)	I	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 351 / 574 (check only one)
Any information copied from such Reports are or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	rance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Gary A. Poliner			Date of Receipt
Mailing Address 311 E Erie Street			0 7 1 5 2 0 0 9
City Milwaukee	State WI	Zip Code 53202-6040	Transaction ID: 20090720-552-13-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		208.00
Name of Employer NML	Occupatio EVP Ips	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4368.00	
Full Name (Last, First, Middle Initial) Gary A. Poliner			Date of Receipt
Mailing Address 311 E Erie Street	07 31 YYYYY 2009		
City <u>M</u> ilwaukee	State WI	Zip Code	Transaction ID: 20090804-552-10-0
FEC ID number of contributing federal political committee.	C	53202-6040	Amount of Each Receipt this Period 208.00
Name of Employer NML	Occupatio EVP lps	n	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 4368.00	
Full Name (Last, First, Middle Initial) Gary A. Poliner			Date of Receipt
Mailing Address 825 N Prospect Av	enue U		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Milwaukee	State WI	Zip Code 53202-3979	Transaction ID: 20090819-620-14-15 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33202 0373	208.00
Name of Employer NML	Occupatio EVP lps	n	
Receipt For: Primary General Other (specify) ▼	- ' - ' -	Year-to-Date ▼ 4368.00	
SUBTOTAL of Receipts This Page (optional			624.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 352 / 574 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insural	Statements may not be sold or used by any person name and address of any political committee to note Company Federal PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Gary A. Poliner Mailing Address 825 N Prospect Aven City Milwaukee FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	Ue U State Zip Code WI 53202-3979 C Occupation EVP Ips Aggregate Year-to-Date ▼ 4368.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) Gary A. Poliner Mailing Address 825 N Prospect Aven City Milwaukee FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)		Date of Receipt M M M / D D / 2009 Transaction ID: 20090921-618-17-1 Amount of Each Receipt this Period 208.00
Full Name (Last, First, Middle Initial) Gary A. Poliner Mailing Address 825 N Prospect Aven City Milwaukee FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	ue U State Zip Code WI 53202-3979 C Occupation EVP Ips Aggregate Year-to-Date ▼ 4368.00	Date of Receipt M M D D V Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		624.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 353 / 574 (check only one) X
A or	ny information copied from such Reports and for commercial purposes, other than using the	Statements may ne name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insural	nce Company	Federal PAC	
	Full Name (Last, First, Middle Initial) Gary A. Poliner			Date of Receipt
	Mailing Address 825 N Prospect Aven	ue U		10 15 2009
	City Milwaukee	State WI	Zip Code 53202-3979	Transaction ID: 20091015164625-543
	FEC ID number of contributing federal political committee.	C	53202-3979	Amount of Each Receipt this Period 208.00
	Name of Employer NML	Occupatio EVP lps	n	
	Receipt For: Primary General Other (specify) ▼	_ ' ' _ ' _ ' _ ' _ ' _ ' _ ' _ ' _ ' _	Year-to-Date ▼ 4368.00	
_	Full Name (Last, First, Middle Initial) Gary A. Poliner			Date of Receipt
	Mailing Address 825 N Prospect Aven	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 20091105152628-543
	Milwaukee	WI	53202-3979	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.00
	Name of Employer NML	Occupatio EVP lps	n	
	Receipt For:	_ ' ' _ ' _ ' _ 	e Year-to-Date ▼	
	Primary General Other (specify) ▼	33 13	4368.00	
_	Full Name (Last, First, Middle Initial) Gary A. Poliner			Date of Receipt
	Mailing Address 825 N Prospect Aven	ue U		1 1 1 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 2009111816423-544
	Milwaukee	WI	53202-3979	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.00
	Name of Employer NML	Occupatio EVP lps	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4368.00	
	SUBTOTAL of Receipts This Page (optional)	1		624.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 354 / 574 (check only one) X
4	any information copied from such Reports and r for commercial purposes, other than using th	Statements mage name and add	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	ice Company	Federal PAC	
۸.	Full Name (Last, First, Middle Initial) Charles R Pruett			Date of Receipt
	Mailing Address 224 Ensworth Place			07 15 2009
	City <u>Nashville</u>	State TN	Zip Code 37205-1922	Transaction ID: 20090720-1236-13-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2625.00	
	Full Name (Last, First, Middle Initial) Charles R Pruett			Date of Receipt
	Mailing Address 224 Ensworth Place			07 31 YYYY 2009
	City	State	Zip Code	Transaction ID: 20090804-1233-10-0
	<u>Nashville</u>	TN	37205-1922	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		2625.00	
_	Full Name (Last, First, Middle Initial) Charles R Pruett	Date of Receipt		
	Mailing Address 224 Ensworth Place			08 15 2009
	City Nashville	State TN	Zip Code 37205-1922	Transaction ID: 20090819-58-14-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	3/203-1922	125.00
	Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 2625.00	
Г	SUBTOTAL of Receipts This Page (optional) .	1		375.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 355 / 574 (check only one) X
A	Any information copied from such Reports and or for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	Federal PAC	
∠ 4 .	Full Name (Last, First, Middle Initial) Charles R Pruett			Date of Receipt
	Mailing Address 224 Ensworth Place			08 / 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Nashville	State TN	Zip Code 37205-1922	Transaction ID: 20090902-58-14-46 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer Self-Employed	Occupation General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2625.00	
- 3.	Full Name (Last, First, Middle Initial) Charles R Pruett	-		Date of Receipt
	Mailing Address 224 Ensworth Place	0 9 1 5 2 0 0 9		
	City	State	Zip Code	Transaction ID: 20090921-61-16-16
	Nashville FEC ID number of contributing federal political committee.	C	37205-1922	Amount of Each Receipt this Period 125.00
	Name of Employer Self-Employed	Occupation General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2625.00	
- :.	Full Name (Last, First, Middle Initial) Charles R Pruett			Date of Receipt
	Mailing Address 224 Ensworth Place			09 30 2009
	City	State	Zip Code	Transaction ID: 20091008103448-61
	Nashville FEC ID number of contributing federal political committee.	C	37205-1922	Amount of Each Receipt this Period 125.00
	Name of Employer Self-Employed	Occupation General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	_ '	e Year-to-Date ▼ 2625.00	
Γ	SUBTOTAL of Receipts This Page (optional) .			375.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 356 / 574 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma	 y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	ce Company	/ Federal PAC	
Full Name (Last, First, Middle Initial) Charles R Pruett			Date of Receipt
Mailing Address 224 Ensworth Place			10 15 2009
City	State	Zip Code	Transaction ID: 2009102293957-61
Nashville FEC ID number of contributing	TN	37205-1922	Amount of Each Receipt this Period
federal political committee.	C		125.00
Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 2625.00	
Full Name (Last, First, Middle Initial)			Date of Descipt
Charles R Pruett Mailing Address 224 Ensworth Place	Date of Receipt 1 0 3 1 2 0 0 9		
City	State	Zip Code	Transaction ID: 20091105152043-61
<u>Nashville</u>	TN	37205-1922	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 2625.00	
Full Name (Last, First, Middle Initial) Charles R Pruett			Date of Receipt
Mailing Address 224 Ensworth Place			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20091118163132-6
Nashville	TN	37205-1922	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 2625.00	
SUBTOTAL of Receipts This Page (optional)			375.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 357 / 574 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	Statements may not be sold or used by any persone name and address of any political committee to nce Company Federal PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) John M Qualy Mailing Address 13 Brentmoor Park City Clayton FEC ID number of contributing federal political committee. Name of Employer Qualy Nwk Of Inc Receipt For: Primary General Other (specify)	State Zip Code MO 63105-3067 C Occupation Special Agent Aggregate Year-to-Date 4368.00	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) John M Qualy Mailing Address 13 Brentmoor Park City Clayton FEC ID number of contributing federal political committee. Name of Employer Qualy Nwk Of Inc Receipt For: Primary General Other (specify)	State Zip Code MO 63105-3067 C Occupation Special Agent Aggregate Year-to-Date 4368.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) John M Qualy Mailing Address 13 Brentmoor Park City Clayton FEC ID number of contributing federal political committee. Name of Employer Qualy Nwk Of Inc Receipt For: Primary General Other (specify)	State Zip Code MO 63105-3067 C Occupation Special Agent Aggregate Year-to-Date ▼ 4368.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		624.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 358 / 574 (check only one) X 11a	
A or	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may be name and add	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
	The Northwestern Mutual Life Insurar	nce Company	Federal PAC		
	Full Name (Last, First, Middle Initial) John M Qualy Mailing Address 13 Brentmoor Park			Date of Receipt	
	Mailing Address 13 Brentmoor Park			08 31 2009	
	City	State	Zip Code	Transaction ID: 20090902-2-14-46	
	Clayton	MO	63105-3067	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		208.00	
	Name of Employer Qualy Nwk Of Inc	Occupatio Special A			
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼		
	Other (specify) ▼	0 0	4368.00		
	Full Name (Last, First, Middle Initial) John M Qualy	Date of Receipt			
	Mailing Address 13 Brentmoor Park			09 / 15 / Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: 20090921-2-16-16	
	<u>Clayton</u> MO		63105-3067	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		208.00	
	Name of Employer Qualy Nwk Of Inc	Occupatio Special A			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	4368.00		
	Full Name (Last, First, Middle Initial) John M Qualy	Date of Receipt			
	Mailing Address 13 Brentmoor Park			09 30 7 2009	
	City	State	Zip Code	Transaction ID: 20091008103448-2	
	Clayton	MO	63105-3067	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		208.00	
	Name of Employer Qualy Nwk Of Inc	Occupatio Special A			
	Receipt For:	Aggregate	e Year-to-Date ▼	_	
	Primary General Other (specify) ▼		4368.00		
		1		624.00	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 359 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	Statements may not be sold or used by any persone name and address of any political committee to nce Company Federal PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) John M Qualy Mailing Address 13 Brentmoor Park City Clayton FEC ID number of contributing federal political committee. Name of Employer Qualy Nwk Of Inc Receipt For: Primary Other (specify)	State Zip Code MO 63105-3067 C Occupation Special Agent Aggregate Year-to-Date 4368.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) John M Qualy Mailing Address 13 Brentmoor Park City Clayton FEC ID number of contributing federal political committee. Name of Employer Qualy Nwk Of Inc Receipt For: Primary General Other (specify)	State Zip Code MO 63105-3067 C Occupation Special Agent Aggregate Year-to-Date 4368.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) John M Qualy Mailing Address 13 Brentmoor Park City Clayton FEC ID number of contributing federal political committee. Name of Employer Qualy Nwk Of Inc Receipt For: Primary General Other (specify)	State Zip Code MO 63105-3067 C Occupation Special Agent Aggregate Year-to-Date 4368.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		624.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 360 / 574 (check only one) X 11a		
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	/ Federal PAC			
Α.	Full Name (Last, First, Middle Initial) Craig L Quinlan			Date of Receipt		
	Mailing Address 229 Roberts Road			11 1 15 2009		
	City <u>Inverness</u>	State IL	Zip Code 60010-5753	Transaction ID: 20091118163132-37 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		42.00		
	Name of Employer Self-Employed	Occupation General	n Insurance Agent			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 210.00			
В.	Full Name (Last, First, Middle Initial) Thomas O. Rabenn Meiling Address - 0410 N. Fairway Drive	Date of Receipt				
	Mailing Address 9410 N Fairway Drive	11 1 15 2009				
	City <u>Bayside</u>	State WI	Zip Code 53217-1321	Transaction ID: 2009111816423-1033 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		10.00		
	Name of Employer NML	Occupation Director	n			
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General Other (specify) ▼		210.00			
С.	Full Name (Last, First, Middle Initial) Steven M. Radke	,				
	Mailing Address 9600 N Crestwood Co	ourt		07 15 2009		
	City <u>Meguon</u>	State W1	Zip Code 53092-5355	Transaction ID: 20090720-846-13-0 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C	30092-3333	30.00		
	Name of Employer NML	Occupation VP Leg 8	on & Reg Relations			
	Receipt For: Primary General Other (specify) ▼	, ' 	e Year-to-Date ▼ 630.00			
	SUBTOTAL of Receipts This Page (optional) .			82.00		
ļ	TOTAL This Period (last page this line numbe		<u> </u>			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 361 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	ne name and address of any political committee	erson for the purpose of soliciting contributions
The Northwestern Mutual Life Insura Full Name (Last, First, Middle Initial)	псе Сотрапу Редегаі РАС	
Steven M. Radke Mailing Address 9600 N Crestwood C	ourt	Date of Receipt
City	State Zip Code	0 7 3 1 2 0 0 9 Transaction ID: 20090804-845-10-0
Mequon	WI 53092-5355	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer NML	Occupation VP Leg & Reg Relations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	
Full Name (Last, First, Middle Initial) Steven M. Radke		Date of Receipt
Mailing Address 9600 N Crestwood C	ourt	08 15 2009
City	State Zip Code	Transaction ID: 20090819-912-14-15
Mequon FEC ID number of contributing federal political committee.	WI 53092-5355	Amount of Each Receipt this Period 30.00
Name of Employer NML	Occupation VP Leg & Reg Relations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	
Full Name (Last, First, Middle Initial) Steven M. Radke	<u> </u>	Date of Receipt
Mailing Address 9600 N Crestwood C	ourt	08 31 2009
City	State Zip Code	Transaction ID: 20090902-912-15-1
Mequon	WI 53092-5355	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer NML	Occupation VP Leg & Reg Relations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	
SUBTOTAL of Receipts This Page (optional)		90.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numb		

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 362 / 574 (check only one) X
0	ny information copied from such Reports and r for commercial purposes, other than using the	Statements man	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insural	nce Company	Federal PAC	
∠ A.	Full Name (Last, First, Middle Initial) Steven M. Radke			Date of Receipt
	Mailing Address 9600 N Crestwood C	ourt		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20090921-907-17-1
	Mequon	WI	53092-5355	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer NML	Occupation VP Leg 8	n & Reg Relations	
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼		630.00	
— В.	Full Name (Last, First, Middle Initial) Steven M. Radke			Date of Receipt
	Mailing Address 9600 N Crestwood C	ourt		09 30 7 2009
	City	State	Zip Code	Transaction ID: 20091008104013-834
	Mequon	WI	53092-5355	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer NML	Occupation VP Leg 8	n & Reg Relations	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	630.00	
_ С.	Full Name (Last, First, Middle Initial) Steven M. Radke			Date of Receipt
	Mailing Address 9600 N Crestwood Co	ourt		10 15 2009
	City	State	Zip Code	Transaction ID: 20091015164625-833
	Mequon	WI	53092-5355	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer NML	Occupation VP Leg &	n & Reg Relations	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	630.00	
	SUBTOTAL of Receipts This Page (optional)			90.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 363 / 574 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	name and addres	ss of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Steven M. Radke Mailing Address 9600 N Crestwood Cou City Mequon FEC ID number of contributing federal political committee. Name of Employer NML Receipt For:	State WI C Occupation	Zip Code 53092-5355 eg Relations ar-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Steven M. Radke Mailing Address 9600 N Crestwood Cou	urt	630.00 Zip Code	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Mequon FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼	C Occupation VP Leg & R Aggregate Ye	eg Relations ear-to-Date ▼ 630.00	Amount of Each Receipt this Period 30.00
Full Name (Last, First, Middle Initial) Randal W. Ralph Mailing Address 3616 Turnberry Drive City Mequon FEC ID number of contributing federal political committee. Name of Employer NML	State WI C Occupation Managing D		Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		367.50	77.50

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 364 / 5 / 4 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur		· ·	
Full Name (Last, First, Middle Initial) Randal W. Ralph			Date of Receipt
Mailing Address 3616 Turnberry Driv	/e		07 31 2009
City <u>Mequon</u>	State WI	Zip Code 53092-6307	Transaction ID: 20090804-1085-10-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		17.50
Name of Employer NML	Occupatio Managin	n g Director	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 367.50	
Full Name (Last, First, Middle Initial) Randal W. Ralph			Date of Receipt
Mailing Address 3616 Turnberry Driv	/e		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Meguon	State WI	Zip Code 53092-6307	Transaction ID: 20090819-1151-14-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		17.50
Name of Employer NML	Occupatio	n g Director	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 367.50	
Full Name (Last, First, Middle Initial) Randal W. Ralph			Date of Receipt
Mailing Address 3616 Turnberry Driv	/e		08 31 2009
City Meguon	State WI	Zip Code 53092-6307	Transaction ID: 20090902-1151-15-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	35032 0007	17.50
Name of Employer NML	Occupatio Managin	n g Director	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 367.50	
SUBTOTAL of Receipts This Page (optiona	<u> </u>		52.50

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 365 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Randal W. Ralph Mailing Address 3616 Turnberry Drive City Mequon FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General	State Zip Code WI 53092-6307 C Occupation Managing Director Aggregate Year-to-Date ▼ 367.50	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Randal W. Ralph Mailing Address 3616 Turnberry Drive City Mequon FEC ID number of contributing federal political committee. Name of Employer NML Receipt For:	State Zip Code WI 53092-6307 C Occupation Managing Director Aggregate Year-to-Date ▼	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Randal W. Ralph Mailing Address 3616 Turnberry Drive City Mequon FEC ID number of contributing federal political committee. Name of Employer NML	State Zip Code WI 53092-6307 C Occupation	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) SUBTOTAL of Receipts This Page (optional)	Managing Director Aggregate Year-to-Date ▼ 367.50	52.50

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 366 / 574 (check only one) X 11a
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	ce Company	/ Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Randal W. Ralph			Date of Receipt
	Mailing Address 3616 Turnberry Drive			10 31 2009
	City <u>Mequo</u> n	State WI	Zip Code 53092-6307	Transaction ID: 20091105152628-1066
	FEC ID number of contributing federal political committee.	C	33092-0307	Amount of Each Receipt this Period 17.50
	Name of Employer NML	Occupatio Managin	on g Director	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 367.50	
- В.	Full Name (Last, First, Middle Initial) Randal W. Ralph			Date of Receipt
	Mailing Address 3616 Turnberry Drive			1 1 1 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 2009111816423-1065
	Mequon FEC ID number of contributing federal political committee.	C	53092-6307	Amount of Each Receipt this Period 17.50
	Name of Employer NML	Occupatio Managin	on g Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 367.50	
- С.	Full Name (Last, First, Middle Initial) Jeff D Reeter	1		Date of Receipt
	Mailing Address 7 Williamsburg Lane			07 15 2009
	City	State	Zip Code	Transaction ID: 20090720-1243-13-1
	Houston FEC ID number of contributing federal political committee.	C	77024-5144	Amount of Each Receipt this Period 75.00
	Name of Employer Texas Fncl Group L P	Occupation Special A		
	Receipt For: Primary General Other (specify) ▼	, ' ' ' 	e Year-to-Date ▼ 1700.00	
	SUBTOTAL of Receipts This Page (optional)	1		110.00
f	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36//5/4 (check only one)
Any information copied from such Reports at or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	rance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Jeff D Reeter			Date of Receipt
Mailing Address 7 Williamsburg Lar	ne		07 31 2009
City Houston	State TX	Zip Code 77024-5144	Transaction ID: 20090804-1240-10-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		75.00
Name of Employer Texas Fncl Group L P	Occupation Special A		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1700.00	
Full Name (Last, First, Middle Initial) Jeff D Reeter			Date of Receipt
Mailing Address 7 Williamsburg Lar	пе		0 8 1 5 2 0 0 9
City Houston	State TX	Zip Code 77024-5144	Transaction ID: 20090819-65-14-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	77024 3144	75.00
Name of Employer Texas Fncl Group L P	Occupation Special A		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1700.00	
Full Name (Last, First, Middle Initial) Jeff D Reeter			Date of Receipt
Mailing Address 7 Williamsburg Lar	ne		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20090902-65-14-46
Houston FEC ID number of contributing federal political committee.	C	77024-5144	Amount of Each Receipt this Period 75.00
Name of Employer Texas Fncl Group L P	Occupation Special A		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1700.00	
SUBTOTAL of Receipts This Page (optional	- I		225.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 368 / 574 (check only one) X 11a
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	e name and add	ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Jeff D Reeter Mailing Address 7 Williamsburg Lane City Houston FEC ID number of contributing federal political committee. Name of Employer Texas Fncl Group L P Receipt For: Primary General Other (specify)	State TX C Occupation Special A Aggregate		Date of Receipt M M M / D D D / Y Y Y Y Y Transaction ID: 20090921-70-16-16 Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) Jeff D Reeter Mailing Address 7 Williamsburg Lane City Houston FEC ID number of contributing federal political committee. Name of Employer Texas Fncl Group L P Receipt For: Primary General Other (specify)	State TX C Occupation Special A Aggregate		Date of Receipt M M D D 2 0 0 9
Full Name (Last, First, Middle Initial) Jeff D Reeter Mailing Address 7 Williamsburg Lane City Houston FEC ID number of contributing federal political committee. Name of Employer Texas Fncl Group L P Receipt For: Primary General Other (specify) ▼	State TX C Occupation Special A Aggregate		Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional) .			300.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 369 / 574 (check only one) X 11a
4	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ice Company	Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Jeff D Reeter			Date of Receipt
	Mailing Address 7 Williamsburg Lane			10 31 2009
	City	State TX	Zip Code	Transaction ID: 20091105152043-70
	Houston FEC ID number of contributing federal political committee.	C	77024-5144	Amount of Each Receipt this Period 100.00
	Name of Employer Texas Fncl Group L P	Occupation Special A		
	Receipt For: Primary General Other (specify) ▼	, ' '	Year-to-Date ▼ 1700.00	
— В.	Full Name (Last, First, Middle Initial) Jeff D Reeter			Date of Receipt
	Mailing Address 7 Williamsburg Lane			1 1 1 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 20091118163132-70
	Houston	TX	77024-5144	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Texas Fncl Group L P	Occupation Special A		
	Receipt For:	'- · · · · · · · · · · · · · · · · ·	Year-to-Date ▼	
	Primary General Other (specify) ▼		1700.00	
c. –	Full Name (Last, First, Middle Initial) David Robert Remstad	I		Date of Receipt
	Mailing Address 2634 N Lake Drive			07 15 2009
	City	State	Zip Code	Transaction ID: 20090720-773-13-0
	Milwaukee FEC ID number of contributing federal political committee.	C	53211-3837	Amount of Each Receipt this Period 59.00
	Name of Employer NML	Occupation VP & Chi	n ef Actuary	
	Receipt For: Primary General Other (specify) ▼	, '	Year-to-Date ▼ 891.00	
	SUBTOTAL of Receipts This Page (optional) .			259.00
r	TOTAL This Period (last page this line number			

Any information copied from such Reports and Statements may not be sold or used by a or for commercial purposes, other than using the name and address of any political committee. A. NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance Company Federal PAC Full Name (Last, First, Middle Initial) David Robert Remstad Mailing Address 2634 N Lake Drive City State Zip Code Milwaukee WI 53211-3837 FEC ID number of contributing federal political committee. Name of Employer NML Primary General Other (specify) ▼ 891. Full Name (Last, First, Middle Initial) David Robert Remstad Mailing Address 2634 N Lake Drive City State Zip Code Milwaukee WI 53211-3837 FEC ID number of contributing federal political committee. City State Zip Code Milwaukee WI 53211-3837 FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Occupation VP & Chief Actuary Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 891. Full Name (Last, First, Middle Initial) David Robert Remstad Mailing Address 2634 N Lake Drive City State Zip Code Milwaukee WI 53211-3837 FEC ID number of contributing federal political committee. City State Zip Code Milwaukee WI 53211-3837 FEC ID number of contributing federal political committee. Coccupation VP & Chief Actuary Receipt For: Aggregate Year-to-Date ▼ Primary General Occupation VP & Chief Actuary Receipt For: Occupation VP & Chief Actuary Receipt For: Aggregate Year-to-Date ▼	e(s) e (check only one) FOR LINE NUMBER: PAGE 370 / 574 (check only one) X 11a
The Northwestern Mutual Life Insurance Company Federal PAC Full Name (Last, First, Middle Initial) David Robert Remstad Mailing Address 2634 N Lake Drive City State Zip Code Milwaukee WI 53211-3837 FEC ID number of contributing federal political committee. Name of Employer NML Primary General Other (specify) ▼ 891. Full Name (Last, First, Middle Initial) David Robert Remstad Mailing Address 2634 N Lake Drive City State Zip Code Milwaukee WI 53211-3837 FEC ID number of contributing federal political committee. C Name of Employer NML Primary General Other (specify) ▼ 391. FEC ID number of contributing federal political committee. C Name of Employer NML Primary General Other (specify) ▼ 391. Full Name (Last, First, Middle Initial) David Robert Remstad Mailing Address 2634 N Lake Drive City State Zip Code WI 53211-3837 FEC ID number of contributing federal political committee. C State Zip Code WI 53211-3837 FUI Name (Last, First, Middle Initial) David Robert Remstad Mailing Address 2634 N Lake Drive City State Zip Code WI 53211-3837 FEC ID number of contributing federal political committee. Name of Employer NML State Zip Code WI 53211-3837 FEC ID number of contributing federal political committee. Name of Employer NML State Zip Code WI 53211-3837	ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
A. David Robert Remstad Mailing Address 2634 N Lake Drive City State Zip Code Milwaukee WI 53211-3837 FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) David Robert Remstad Mailing Address 2634 N Lake Drive City State Zip Code Milwaukee WI 53211-3837 FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) David Robert Remstad Mailing Address 2634 N Lake Drive City State Zip Code Milwaukee Secapt Year-to-Date ▼ Full Name (Last, First, Middle Initial) David Robert Remstad Mailing Address 2634 N Lake Drive City State Zip Code Milwaukee WI 53211-3837 FEC ID number of contributing federal political committee. City State Zip Code Milwaukee WI 53211-3837 FEC ID number of contributing federal political committee. Name of Employer NML Name of Employer NML Name of Employer Occupation VP & Chief Actuary Receipt For: Aggregate Year-to-Date ▼	
City State Zip Code WI 53211-3837 FEC ID number of contributing federal political committee. Name of Employer NML Receipt For:	Date of Receipt
Milwaukee MI 53211-3837 FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) David Robert Remstad Mailing Address 2634 N Lake Drive City State Zip Code Milwaukee WI 53211-3837 FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Occupation VP & Chief Actuary Aggregate Year-to-Date ▼ City State Zip Code WI 53211-3837 FEC ID number of contributing federal political committee. Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) David Robert Remstad Mailing Address 2634 N Lake Drive City State Zip Code Milwaukee WI 53211-3837 FEC ID number of contributing federal political committee. City State Zip Code Milwaukee WI 53211-3837 FEC ID number of contributing federal political committee. Name of Employer NML Name of Employer NML PEC ID number of contributing federal political committee. Name of Employer NML Name of Employer NML Peceipt For: Aggregate Year-to-Date ▼	07 31 7 2009
FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) David Robert Remstad Mailing Address 2634 N Lake Drive City State Zip Code WI 53211-3837 FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) David Robert Remstad Mailing Address 2634 N Lake Drive City State Zip Code WI 53211-3837 C C Primary General Occupation VP & Chief Actuary Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Primary General State Zip Code WI 53211-3837 Full Name (Last, First, Middle Initial) David Robert Remstad Mailing Address 2634 N Lake Drive City State Zip Code WI 53211-3837 FEC ID number of contributing federal political committee. Name of Employer NML Name of Employer Occupation VP & Chief Actuary Receipt For: Aggregate Year-to-Date ▼	Transaction ID: 20090804-772-10-0
NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) David Robert Remstad Mailing Address 2634 N Lake Drive City State Zip Code Milwaukee WI 53211-3837 FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Cupation VP & Chief Actuary Aggregate Year-to-Date ▼ Rell Name (Last, First, Middle Initial) David Robert Remstad Mailing Address 2634 N Lake Drive City State Zip Code Milwaukee WI 53211-3837 Full Name (Last, First, Middle Initial) David Robert Remstad Mailing Address 2634 N Lake Drive City State Zip Code Milwaukee WI 53211-3837 FEC ID number of contributing federal political committee. Name of Employer NML Name of Employer NML Receipt For: Aggregate Year-to-Date ▼ Occupation VP & Chief Actuary Aggregate Year-to-Date ▼	Amount of Each Receipt this Period 59.00
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) David Robert Remstad Mailing Address 2634 N Lake Drive City State Zip Code Milwaukee WI 53211-3837 FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) David Robert Remstad Mailing Address 2634 N Lake Drive City State Zip Code WI 53211-3837 Full Name (Last, First, Middle Initial) David Robert Remstad Mailing Address 2634 N Lake Drive City State Zip Code Milwaukee WI 53211-3837 FEC ID number of contributing federal political committee. Name of Employer NML Name of Employer NML Receipt For: Aggregate Year-to-Date ▼ Cuty State Zip Code WI 53211-3837 Cuty State Zip Code Milwaukee WI 53211-3837	
David Robert Remstad Mailing Address 2634 N Lake Drive City State Zip Code Milwaukee WI 53211-3837 FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) David Robert Remstad Mailing Address 2634 N Lake Drive City State Zip Code Milwaukee WI 53211-3837 FEC ID number of contributing federal political committee. Name of Employer NML Name of Employer NML Receipt For: Aggregate Year-to-Date ▼ C C Caty State Zip Code WI 53211-3837 C C C C C Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	00
City State Zip Code Milwaukee WI 53211-3837 FEC ID number of contributing federal political committee. Name of Employer NML Occupation VP & Chief Actuary Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) David Robert Remstad Mailing Address 2634 N Lake Drive City State Zip Code Milwaukee WI 53211-3837 FEC ID number of contributing federal political committee. Name of Employer NML Name of Employer NML Name of Employer NML Receipt For: Aggregate Year-to-Date ▼	Date of Receipt
Milwaukee Milwaukee WI 53211-3837 FEC ID number of contributing federal political committee. Name of Employer NML Name of Employer NML Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) David Robert Remstad Mailing Address 2634 N Lake Drive City Milwaukee WI 53211-3837 FEC ID number of contributing federal political committee. Name of Employer NML Name of Employer NML Receipt For: Aggregate Year-to-Date ▼ Occupation VP & Chief Actuary Aggregate Year-to-Date ▼	08 15 2009
FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) David Robert Remstad Mailing Address 2634 N Lake Drive City State Zip Code Milwaukee WI 53211-3837 FEC ID number of contributing federal political committee. Name of Employer NML Name of Employer NML Receipt For: Aggregate Year-to-Date ▼ Occupation VP & Chief Actuary Aggregate Year-to-Date ▼	Transaction ID: 20090819-839-14-15
Receipt For: Primary General Aggregate Year-to-Date ▼ Other (specify) ▼ 891. Full Name (Last, First, Middle Initial) David Robert Remstad Mailing Address 2634 N Lake Drive City State Zip Code Milwaukee WI 53211-3837 FEC ID number of contributing federal political committee. Name of Employer NML Occupation VP & Chief Actuary Receipt For: Aggregate Year-to-Date ▼	Amount of Each Receipt this Period 59.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) David Robert Remstad Mailing Address 2634 N Lake Drive City State Zip Code Milwaukee WI 53211-3837 FEC ID number of contributing federal political committee. Name of Employer NML Name of Employer NML Receipt For: Aggregate Year-to-Date ▼	
David Robert Remstad Mailing Address 2634 N Lake Drive City State Zip Code Milwaukee WI 53211-3837 FEC ID number of contributing federal political committee. Name of Employer NML Name of Employer NML Receipt For: Aggregate Year-to-Date ▼	00
City State Zip Code Milwaukee WI 53211-3837 FEC ID number of contributing federal political committee. Name of Employer NML Occupation VP & Chief Actuary Receipt For: Aggregate Year-to-Date ▼	Date of Receipt
Milwaukee WI 53211-3837 FEC ID number of contributing federal political committee. C Name of Employer NML Occupation VP & Chief Actuary Receipt For: Aggregate Year-to-Date ▼	08 31 Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer NML Occupation VP & Chief Actuary Receipt For: Aggregate Year-to-Date	Transaction ID: 20090902-839-15-1
Receipt For: Aggregate Year-to-Date ▼	Amount of Each Receipt this Period 59.00
Receipt For: Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼ 891.	00
SUBTOTAL of Receipts This Page (optional)	177.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 371 / 574 (check only one) X
7	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	e name and add	lress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
. ∠ 4.	Full Name (Last, First, Middle Initial) David Robert Remstad	.oo company	1 00010.17.10	Date of Receipt
•	Mailing Address 2634 N Lake Drive			0 9 1 5 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Milwaukee	State WI	Zip Code 53211-3837	Transaction ID: 20090921-834-17-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		59.00
	Name of Employer NML	Occupation VP & Chi	n ef Actuary	
	Receipt For: Primary General Other (specify) ▼	- '	Year-to-Date ▼ 891.00	
- 3.	Full Name (Last, First, Middle Initial) David Robert Remstad Mailing Address 2634 N Lake Drive	<u> </u>		Date of Receipt
	City	State	Zip Code	0 9 3 0 2 0 0 9 Transaction ID: 20091008104013-761
	<u>Milwaukee</u>	WI	53211-3837	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		59.00
	Name of Employer NML	Occupation VP & Chi	n ef Actuary	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 891.00	
- :.	Full Name (Last, First, Middle Initial) David Robert Remstad			Date of Receipt
	Mailing Address 2634 N Lake Drive			10 15 2009
	City Milwaukee	State WI	Zip Code 53211-3837	Transaction ID: 20091015164625-760 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33211 3007	59.00
	Name of Employer NML	Occupation VP & Chi	n ef Actuary	
	Receipt For: Primary General Other (specify) ▼	_ '	Year-to-Date ▼	
	SUBTOTAL of Receipts This Page (optional) .	1		177.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 372 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	nd Statements may not be sold or used by any person the name and address of any political committee to rance Company Federal PAC	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) David Robert Remstad Mailing Address 2634 N Lake Drive		Date of Receipt 1 0 3 1 2 0 0 9
City Milwaukee	State Zip Code WI 53211-3837	Transaction ID: 20091105152628-760 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	59.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation VP & Chief Actuary Aggregate Year-to-Date 891.00]
Full Name (Last, First, Middle Initial) David Robert Remstad Mailing Address 2634 N Lake Drive		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 2009111816423-760
Milwaukee	WI 53211-3837	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	59.00
Name of Employer NML	Occupation VP & Chief Actuary	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 891.00	
Full Name (Last, First, Middle Initial) Peter K. Richardson		Date of Receipt
Mailing Address 720 E Green Tree	Road	07 31 7 2009
City Fox Point	State Zip Code WI 53217-3615	Transaction ID: 20090804-527-10-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 33217-3013	17.00
Name of Employer NML	Occupation Asst Gc & Asst Sec	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 333.00	
	al)	135.00

orposes, other than using the name of contributing committee.	ments may not be sold or used by any persone and address of any political committee to company Federal PAC State Zip Code WI 53217-3615 C Deccupation Asst Gc & Asst Sec Aggregate Year-to-Date 3333.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
First, Middle Initial) 720 E Green Tree Road of contributing ommittee. er General cify) First, Middle Initial)	State Zip Code WI 53217-3615 C Decupation Asst Gc & Asst Sec Aggregate Year-to-Date ▼ 333.00	Transaction ID: 20090819-595-14-15 Amount of Each Receipt this Period 17.00
720 E Green Tree Road of contributing ommittee. er General First, Middle Initial)	WI 53217-3615 C Decupation Asst Gc & Asst Sec Aggregate Year-to-Date ▼ 333.00	Transaction ID: 20090819-595-14-15 Amount of Each Receipt this Period 17.00
of contributing committee. er General cify) First, Middle Initial)	WI 53217-3615 C Decupation Asst Gc & Asst Sec Aggregate Year-to-Date ▼ 333.00	Transaction ID: 20090819-595-14-15 Amount of Each Receipt this Period 17.00
General First, Middle Initial)	WI 53217-3615 C Decupation Asst Gc & Asst Sec Aggregate Year-to-Date ▼ 333.00	Amount of Each Receipt this Period 17.00
General First, Middle Initial)	C Description Asst Gc & Asst Sec Aggregate Year-to-Date ▼ 333.00	17.00
General cify) ▼ First, Middle Initial) on	Asst Gc & Asst Sec Aggregate Year-to-Date ▼ 333.00	Date of Receipt
General cify) ▼ First, Middle Initial) on	333.00	Date of Receipt
on		Date of Receipt
720 E Green Tree Road		
	08 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	State Zip Code	Transaction ID: 20090902-595-15-1
	WI 53217-3615	Amount of Each Receipt this Period
of contributing committee.	C	17.00
	Occupation Asst Gc & Asst Sec	
General cify) ▼	Aggregate Year-to-Date ▼ 333.00	
First, Middle Initial)		Date of Receipt
720 E Green Tree Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	State Zip Code	Transaction ID: 20090921-593-17-1
of contributing ommittee.	WI 53217-3615	Amount of Each Receipt this Period 17.00
	·	
cify) ▼		
	ommittee.	Occupation Asst Gc & Asst Sec Aggregate Year-to-Date

I	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 374 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insuran	ce Company	/ Federal PAC	
A.	Full Name (Last, First, Middle Initial) Peter K. Richardson Mailing Address 720 E Green Tree Roa	- d		Date of Receipt
	City	au State	Zip Code	0 9 3 0 2 0 0 9 Transaction ID: 20091008104013-519
	Fox Point	WI	53217-3615	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		17.00
	Name of Employer NML	Occupation Asst Gc	»n & Asst Sec	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 333.00	
- В.	Full Name (Last, First, Middle Initial) Peter K. Richardson			Date of Receipt
	Mailing Address 720 E Green Tree Road			10 15 2009
	City	State	Zip Code	Transaction ID: 20091015164625-518
	Fox Point	WI	53217-3615	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		17.00
	Name of Employer NML	Occupation Asst Gc	n & Asst Sec	
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼		333.00	
_ С.	Full Name (Last, First, Middle Initial) Peter K. Richardson			Date of Receipt
	Mailing Address 720 E Green Tree Roa	ad		10 31 2009
	City Fox Point	State WI	Zip Code 53217-3615	Transaction ID: 20091105152628-518
	FEC ID number of contributing federal political committee.	C	33217-3013	Amount of Each Receipt this Period 17.00
	Name of Employer NML	Occupation Asst Gc	n & Asst Sec	
	Receipt For: Primary General Other (specify) ▼	, '	e Year-to-Date ▼ 333.00	
	SUBTOTAL of Receipts This Page (optional)	1		51.00
	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 375 / 574 (check only one) X
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	and Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Peter K. Richardson	drance Company Federal PAC	Date of Receipt
Mailing Address 720 E Green Tree	Road	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Fox Point	State Zip Code WI 53217-3615	Transaction ID: 2009111816423-519 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	17.00
Name of Employer NML	Occupation Asst Gc & Asst Sec	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 333.00	
Full Name (Last, First, Middle Initial) Daniel A. Riedl		Date of Receipt
Mailing Address 6604 Cedar Street	07 15 2009	
City	State Zip Code	Transaction ID: 20090720-691-13-0
Wauwatosa	WI 53213-3252	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer NML	Occupation VP Dist Pol & Ops	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 465.00	
Full Name (Last, First, Middle Initial) Daniel A. Riedl		Date of Receipt
Mailing Address 6604 Cedar Street	t	07 031 7 2009
City Wauwatosa	State Zip Code WI 53213-3252	Transaction ID: 20090804-690-10-0
FEC ID number of contributing federal political committee.	C 33213-3232	Amount of Each Receipt this Period 25.00
Name of Employer NML	Occupation VP Dist Pol & Ops	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 465.00	
	nal)	67.00

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 376 / 574 (check only one) X 11a 11b 11c 12
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may g the name and add	 y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions o solicit contributions from such committee.
The Northwestern Mutual Life Insu	rance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Daniel A. Riedl			Date of Receipt
Mailing Address 6604 Cedar Street			08 15 2009
City	State	Zip Code	Transaction ID: 20090819-757-14-1
Wauwatosa	WI	53213-3252	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer NML	Occupation VP Dist F	n Pol & Ops	
Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼		465.00	
Full Name (Last, First, Middle Initial) Daniel A. Riedl	<u>'</u>		Date of Receipt
Mailing Address 6604 Cedar Street			08 31 7 2009
City	State	Zip Code	Transaction ID: 20090902-757-15-1
Wauwatosa	WI	53213-3252	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer NML	Occupation VP Dist F	n Pol & Ops	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 465.00	
Full Name (Last, First, Middle Initial) Daniel A. Riedl	l		Date of Receipt
Mailing Address 6604 Cedar Street			09 15 2009
City	State	Zip Code	Transaction ID: 20090921-753-17-1
Wauwatosa	WI	53213-3252	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer NML	Occupation VP Dist F	n Pol & Ops	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		465.00	
SUBTOTAL of Receipts This Page (option:			75.00

TOTAL This Period (last page this line number only)

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 377 / 574 (check only one) X 11a
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Daniel A. Riedl			Date of Receipt
	Mailing Address 6604 Cedar Street			09 30 2009
	City Wauwatosa	State WI	Zip Code 53213-3252	Transaction ID: 20091008104013-680 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00210 0202	25.00
	Name of Employer NML	Occupation VP Dist I	n Pol & Ops	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 465.00	
ь В.	Full Name (Last, First, Middle Initial) Daniel A. Riedl			Date of Receipt
	Mailing Address 6604 Cedar Street			10 15 2009
	City State Wauwatosa WI		Zip Code 53213-3252	Transaction ID: 20091015164625-679 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33213-3232	25.00
	Name of Employer NML	Occupation VP Dist I	n Pol & Ops	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 465.00	
с. С.	Full Name (Last, First, Middle Initial) Daniel A. Riedl	1		Date of Receipt
	Mailing Address 6604 Cedar Street			10 31 2009
	City Wauwatosa	State WI	Zip Code 53213-3252	Transaction ID: 20091105152628-679 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33213-3232	25.00
	Name of Employer NML	Occupation VP Dist I	n Pol & Ops	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 465.00	
	SUBTOTAL of Receipts This Page (optional)	1		75.00
Ì	TOTAL This Period (last page this line numbe	r only)		

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 378 / 574 (check only one) X
4	Any information copied from such Reports and or for commercial purposes, other than using the	Statements mane and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	Federal PAC	
۸.	Full Name (Last, First, Middle Initial) Daniel A. Riedl			Date of Receipt
	Mailing Address 6604 Cedar Street			11 1 15 2009
	City Wauwatosa	State WI	Zip Code 53213-3252	Transaction ID: 2009111816423-679 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer NML	Occupatio VP Dist I	n Pol & Ops	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 465.00	
	Full Name (Last, First, Middle Initial) Marcia Rimai			Date of Receipt
	Mailing Address 4100 N Lake Drive			07 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Transaction ID: 20090720-650-13-0
	Shorewood	WI	53211-1719	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			208.00
	Name of Employer NML	Occupatio EVP & C	n hief Admin Officer	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	4368.00	
_	Full Name (Last, First, Middle Initial) Marcia Rimai			Date of Receipt
	Mailing Address 4100 N Lake Drive			07 31 YYYY 2009
	City	State	Zip Code	Transaction ID: 20090804-649-10-0
	Shorewood FEC ID number of contributing federal political committee.	C	53211-1719	Amount of Each Receipt this Period 208.00
	Name of Employer NML	Occupatio EVP & C	n hief Admin Officer	
	Receipt For: Primary General Other (specify) ▼	- '	e Year-to-Date ▼ 4368.00	
Γ	SUBTOTAL of Receipts This Page (optional)	1		441.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for each cat	te schedule(s) tegory of the mmary Page	FOR LINE NUMBER: PAGE 379 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 11
\ \	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	name and address of any po	litical committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
/	Full Name (Last, First, Middle Initial)	e Company rederal FAC		
۱.	Marcia Rimai Mailing Address 4100 N Lake Drive			Date of Receipt M M
	City Shorewood	State Zip Code WI 53211-17	'19	Transaction ID: 20090819-716-14-15 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.00
	Name of Employer NML	Occupation EVP & Chief Admin C	Officer	-
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	▼ 4368.00	
- s.	Full Name (Last, First, Middle Initial) Marcia Rimai Mailing Address 4100 N Lake Drive			Date of Receipt
	City State Zip Code			0 8 3 1 2 0 0 9 Transaction ID: 20090902-716-15-1
	Shorewood	WI 53211-17	'19	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.00
	Name of Employer NML	Occupation EVP & Chief Admin C	Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	4368.00	
. –	Full Name (Last, First, Middle Initial) Marcia Rimai			Date of Receipt
	Mailing Address 4100 N Lake Drive			09 15 2009
	City <u>Shorewood</u>	State Zip Code WI 53211-17	'19	Transaction ID: 20090921-712-17-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.00
	Name of Employer NML	Occupation EVP & Chief Admin C	Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	▼ 4368.00	
	SUBTOTAL of Receipts This Page (optional)		.	624.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 380 / 574 (check only one) X
(Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
	The Northwestern Mutual Life Insuran	ice Company	Federal PAC	
۸.	Full Name (Last, First, Middle Initial) Marcia Rimai			Date of Receipt
	Mailing Address 4100 N Lake Drive	01-1-	7's Oads	09 / 30 / 2009
	City Shorewood	State WI	Zip Code 53211-1719	Transaction ID: 20091008104013-639 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.00
	Name of Employer NML	Occupation EVP & C	n hief Admin Officer	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 4368.00	
- В.	Full Name (Last, First, Middle Initial) Marcia Rimai			Date of Receipt
	Mailing Address 4100 N Lake Drive			10 15 2009
	City	State	Zip Code	Transaction ID: 20091015164625-638
	Shorewood FEC ID number of contributing federal political committee.	C	53211-1719	Amount of Each Receipt this Period 208.00
	Name of Employer NML	Occupation EVP & C	n hief Admin Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4368.00	
-).	Full Name (Last, First, Middle Initial) Marcia Rimai			Date of Receipt
	Mailing Address 4100 N Lake Drive			10 31 2009
	City Shorewood	State WI	Zip Code 53211-1719	Transaction ID: 20091105152628-638 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.00
	Name of Employer NML	Occupation EVP & C	n hief Admin Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4368.00	
	SUBTOTAL of Receipts This Page (optional)			624.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 381/5/4 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may the name and add	/ not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	rance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Marcia Rimai			Date of Receipt
Mailing Address 4100 N Lake Drive	1 1 1 5 2 0 0 9		
City Shorewood	State WI	Zip Code 53211-1719	Transaction ID: 2009111816423-638 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		208.00
Name of Employer NML	Occupation EVP & C	n hief Admin Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4368.00	
Full Name (Last, First, Middle Initial) John D Rivers, Jr.			Date of Receipt
Mailing Address 3601 River Ridge Cove			0 7 1 5 2 0 0 9
City Prospect	State KY	Zip Code 40059-8038	Transaction ID: 20090720-1214-13- Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10000 0000	125.00
Name of Employer NM Louisville Inc	Occupation Special A		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 2625.00	
Full Name (Last, First, Middle Initial) John D Rivers, Jr.			Date of Receipt
Mailing Address 3601 River Ridge (Cove		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Prospect	State KY	Zip Code 40059-8038	Transaction ID: 20090804-1211-10-
FEC ID number of contributing federal political committee.	C	40059-8038	Amount of Each Receipt this Period 125.00
Name of Employer NM Louisville Inc	Occupation Special A		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 2625.00	
SUBTOTAL of Receipts This Page (options	al)		458.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 382/5/4 (check only one)
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may g the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	urance Company	Federal PAC	
Full Name (Last, First, Middle Initial) John D Rivers, Jr.			Date of Receipt
Mailing Address 3601 River Ridge	08 15 2009		
City Prospect	State KY	Zip Code 40059-8038	Transaction ID: 20090819-36-14-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer NM Louisville Inc	Occupation Special A		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2625.00	
Full Name (Last, First, Middle Initial) John D Rivers, Jr.			Date of Receipt
Mailing Address 3601 River Ridge Cove			0 8 3 1 2 0 0 9
City State Zip Code Prospect KY 40059-8038			Transaction ID: 20090902-36-14-46 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10000000	125.00
Name of Employer NM Louisville Inc	Occupation Special A		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 2625.00	
Full Name (Last, First, Middle Initial) John D Rivers, Jr.			Date of Receipt
Mailing Address 3601 River Ridge	Cove		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Prospect	State KY	Zip Code 40059-8038	Transaction ID: 20090921-36-16-16
FEC ID number of contributing federal political committee.	C	40035-8036	Amount of Each Receipt this Period 125.00
Name of Employer NM Louisville Inc	Occupation Special A		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 2625.00	
SUBTOTAL of Receipts This Page (option	ial)		375.00

	CHEDULE A (FEC Form 3X EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 383 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar	ny information copied from such Reports and for commercial purposes, other than using t NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	d Statements may not be sold or used by any per the name and address of any political committee	son for the purpose of soliciting contributions
∠_ \ .	Full Name (Last, First, Middle Initial) John D Rivers, Jr. Mailing Address 3601 River Ridge Co		Date of Receipt O 9
	City Prospect	State Zip Code KY 40059-8038	Transaction ID: 20091008103448-36
	FEC ID number of contributing federal political committee.	C 40039-0036	Amount of Each Receipt this Period 125.00
	Name of Employer NM Louisville Inc	Occupation Special Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2625.00	
3.	Full Name (Last, First, Middle Initial) John D Rivers, Jr. Mailing Address 3601 River Ridge Co	ove	Date of Receipt
	City	State Zip Code	Transaction ID: 2009102293957-36
	Prospect	KY 40059-8038	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	125.00
	Name of Employer NM Louisville Inc	Occupation Special Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2625.00	
	Full Name (Last, First, Middle Initial) John D Rivers, Jr. Mailing Address 3601 River Ridge Co	ove	Date of Receipt
	City	State Zip Code	Transaction ID: 20091105152043-36
	Prospect	KY 40059-8038	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	125.00
	Name of Employer NM Louisville Inc	Occupation Special Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2625.00	
		•	375.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 384 / 574 (check only one) X	
, c	Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	Statements may he name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
	The Northwestern Mutual Life Insura	nce Company	Federal PAC		
۱.	Full Name (Last, First, Middle Initial) John D Rivers, Jr.			Date of Receipt	
	Mailing Address 3601 River Ridge Co			11 1 5 2009	
	City Prospect	State KY	Zip Code 40059-8038	Transaction ID: 20091118163132-36 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		125.00	
	Name of Employer NM Louisville Inc	Occupatio Special A			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2625.00		
. –	Full Name (Last, First, Middle Initial) Bethany M. Rodenhuis			Date of Receipt	
	Mailing Address 3900 N Lake Drive			07 15 Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: 20090720-651-13-0 Amount of Each Receipt this Period	
	Shorewood	WI	53211-2448		
	FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Occupation VP Corp Aggregate			60.00	
			e Year-to-Date ▼		
	Primary General Other (specify) ▼		948.00		
_	Full Name (Last, First, Middle Initial) Bethany M. Rodenhuis			Date of Receipt	
	Mailing Address 3900 N Lake Drive			07 31 YYYY 2009	
	City	State	Zip Code	Transaction ID: 20090804-650-10-0	
	Shorewood	WI	53211-2448	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		60.00	
	Name of Employer NML	Occupatio VP Corp			
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 948.00		
	SUBTOTAL of Receipts This Page (optional)			245.00	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 385 / 574 (check only one) X
4	Any information copied from such Reports and or for commercial purposes, other than using the	Statements may no e name and addre	ot be sold or used by any pers ss of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	ice Company F	ederal PAC	
۸.	Full Name (Last, First, Middle Initial) Bethany M. Rodenhuis			Date of Receipt
	Mailing Address 3900 N Lake Drive			08 15 2009
	City Shorewood	State WI	Zip Code 53211-2448	Transaction ID: 20090819-717-14-15 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	JULIA DE LA CONTRACTOR	60.00
	Name of Employer NML	Occupation VP Corp PI	na	
	Receipt For: Primary General Other (specify) ▼	, '	ear-to-Date ▼ 948.00	
_ 3.	Full Name (Last, First, Middle Initial) Bethany M. Rodenhuis			Date of Receipt
	Mailing Address 3900 N Lake Drive	0 8		
	City	State	Zip Code	Transaction ID: 20090902-717-15-1
	Shorewood FEC ID number of contributing federal political committee.	C	53211-2448	Amount of Each Receipt this Period 60.00
	Name of Employer NML	Occupation VP Corp PI	ng	
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 948.00	
_ ;.	Full Name (Last, First, Middle Initial) Bethany M. Rodenhuis			Date of Receipt
-	Mailing Address 3900 N Lake Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20090921-713-17-1
	Shorewood FEC ID number of contributing federal political committee.	C	53211-2448	Amount of Each Receipt this Period 60.00
	Name of Employer NML	Occupation VP Corp PI	ng	
	Receipt For: Primary General Other (specify) ▼	, '	ear-to-Date ▼ 948.00	
	SUBTOTAL of Receipts This Page (optional) .			180.00

SCHEDULE A (FEC Forn	for each ca	ate schedule(s) ategory of the ummary Page FOR LINE NUMBER: PAGE 386 / 5 / 4				
Any information copied from such Report for commercial purposes, other than	rts and Statements may not be sold or using the name and address of any po	r used by any person for the purpose of soliciting contributions olitical committee to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	nsurance Company Federal PA	.c				
Full Name (Last, First, Middle Initial) Bethany M. Rodenhuis		Date of Receipt				
	Mailing Address 3900 N Lake Drive					
City Shorewood	State Zip Code WI 53211-24					
FEC ID number of contributing federal political committee.	C	60.00				
Name of Employer NML	Occupation VP Corp PIng					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	948.00				
Full Name (Last, First, Middle Initial) Bethany M. Rodenhuis		Date of Receipt				
Mailing Address 3900 N Lake D	10 15 2009					
City Shorewood	State Zip Code WI 53211-24					
FEC ID number of contributing federal political committee.	C	60.00				
Name of Employer NML	Occupation VP Corp Plng					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	948.00				
Full Name (Last, First, Middle Initial) Bethany M. Rodenhuis		Date of Receipt				
Mailing Address 3900 N Lake D	rive	10 31 2009				
City Shorewood	State Zip Code WI 53211-24	11411040111121				
FEC ID number of contributing federal political committee.	C	60.00				
Name of Employer NML	Occupation VP Corp Plng					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	948.00				
SUBTOTAL of Receipts This Page (o	ntional)	180.00				

A.

В.

C.

SCHEDULE A (FEC Form 3X)	Use separate sc	FOR LINE NUMBER: PAGE 387 / 574
ITEMIZED RECEIPTS	y of the (crieck only one)	
	Detailed Summa	ry Page X 11a 11b 11c 12 17 18 19 19 19 19 19 19 19
Any information copied from such Reports and S	atements may not be sold or used	
or for commercial purposes, other than using the	name and address of any political	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
The Northwestern Mutual Life Insurance	e Company Federal PAC	
Full Name (Last, First, Middle Initial) Bethany M. Rodenhuis		Date of Receipt
Mailing Address 3900 N Lake Drive		111 / 15 / 2009
City	State Zip Code	Transaction ID: 2009111816423-639
Shorewood	WI 53211-2448	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	60.00
Name of Employer NML	Occupation VP Corp PIng	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼		948.00
Other (specify) V	0 0 0 0 0 0	
Full Name (Last, First, Middle Initial) Tammy M. Roou		Date of Receipt
Mailing Address N99 W14710 Amber D	rive	0 8 1 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20090819-898-14-15
Germantown	WI 53022	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer NML	Occupation	
Receipt For:	VP & Ins Prod & Dist Cnl	
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼		324.00
Full Name (Last, First, Middle Initial) Tammy M. Roou		Date of Receipt
Mailing Address N99 W14710 Amber D	rive	08 31 2009
City	State Zip Code	Transaction ID: 20090902-898-15-1
<u>Germantown</u>	WI 53022	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	20.00
Name of Employer NML	Occupation	
Receipt For:	VP & Ins Prod & Dist Cnl	
Primary General	Aggregate Year-to-Date ▼	1 1 1
Other (specify) ▼	0 0 0 0 0 0	324.00
SUBTOTAL of Receipts This Page (optional)		100.00
TOTAL This Period (last page this line number	only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 388 / 574 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insural	Statements may not be sold or used by any person name and address of any political committee to note Company Federal PAC	on for the purpose of soliciting contributions a solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Tammy M. Roou Mailing Address N99 W14710 Amber City Germantown	State Zip Code WI 53022	Date of Receipt M M M D D D 20090921-893-17-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation VP & Ins Prod & Dist Cnl Aggregate Year-to-Date 324.00	20.00
Full Name (Last, First, Middle Initial) Tammy M. Roou Mailing Address N99 W14710 Amber City Germantown	Drive State Zip Code WI 53022	Date of Receipt M M D D V Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	Occupation VP & Ins Prod & Dist Cnl Aggregate Year-to-Date 324.00	20.00
Full Name (Last, First, Middle Initial) Tammy M. Roou Mailing Address N99 W14710 Amber City	State Zip Code	Date of Receipt M M M
Germantown FEC ID number of contributing federal political committee.	WI 53022	Amount of Each Receipt this Period 20.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation VP & Ins Prod & Dist Cnl Aggregate Year-to-Date ▼ 324.00	
SUBTOTAL of Receipts This Page (optional)		60.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 389 / 574 (check only one) X 11a
Any i	nformation copied from such Reports and S r commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	AME OF COMMITTEE (In Full) he Northwestern Mutual Life Insuran	ice Company	/ Federal PAC	
	ull Name (Last, First, Middle Initial) ammy M. Roou			Date of Receipt
M	ailing Address N99 W14710 Amber [M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	ity Sermantown	State WI	Zip Code 53022	Transaction ID: 20091105152628-819 Amount of Each Receipt this Period
FI	EC ID number of contributing deral political committee.	С		20.00
N N	ame of Employer ML	Occupation VP & Ins	on S Prod & Dist Cnl	
R	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 324.00	
B. <u>T</u>	ull Name (Last, First, Middle Initial) ammy M. Roou			Date of Receipt
_	lailing Address N99 W14710 Amber [11 1 15 2009		
	ity Sermantown	State WI	Zip Code 53022	Transaction ID: 2009111816423-819 Amount of Each Receipt this Period
FI	EC ID number of contributing deral political committee.	C	33022	20.00
N N	ame of Employer ML	Occupation VP & Ins	on s Prod & Dist Cnl	
R	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 324.00	
	ull Name (Last, First, Middle Initial)			Date of Receipt
M	ailing Address 139 Deep Valley Road	d		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	ity Iew Canaan	State CT	Zip Code 06840-2804	Transaction ID: 20090921-64-16-16 Amount of Each Receipt this Period
FI	EC ID number of contributing deral political committee.	С		208.00
N S	ame of Employer elf-Employed	Occupation General	n Insurance Agent	
R	eceipt For: Primary General Other (specify) ▼	, '	e Year-to-Date ▼ 1040.00	
SUE	BTOTAL of Receipts This Page (optional)			248.00
	AL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 390 / 574 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and addr	ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Matt Russo Mailing Address 139 Deep Valley Road City New Canaan FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify)	State CT C Occupation General In	Zip Code 06840-2804 ssurance Agent Year-to-Date 1040.00	Date of Receipt M M D 3 0 2 0 0 9
Full Name (Last, First, Middle Initial) Matt Russo Mailing Address 139 Deep Valley Road City New Canaan FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify)	State CT C Occupation General In	Zip Code 06840-2804 surance Agent Year-to-Date ▼ 1040.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Matt Russo Mailing Address 139 Deep Valley Road City New Canaan FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify)	State CT C Occupation General In	Zip Code 06840-2804 surance Agent Year-to-Date ▼	Date of Receipt M M 2009
SUBTOTAL of Receipts This Page (optional)			624.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 391 / 574 (check only one) X
	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ce Company	/ Federal PAC	
∠ A .	Full Name (Last, First, Middle Initial) Matt Russo			Date of Receipt
	Mailing Address 139 Deep Valley Road	11 1 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City New Canaan	State CT	Zip Code 06840-2804	Transaction ID: 20091118163132-64 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00040 2004	208.00
	Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	- '	e Year-to-Date ▼ 1040.00	
- В.	Full Name (Last, First, Middle Initial) Stephen G. Ruys			Date of Receipt
	Mailing Address 2336 N 90th Street	08 31 2009		
	City	State	Zip Code	Transaction ID: 20090902-909-15-1
	Wauwatosa FEC ID number of contributing federal political committee.	C	53226-1829	Amount of Each Receipt this Period 14.00
	Name of Employer NML	Occupation Dir IS	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 276.00	
- С.	Full Name (Last, First, Middle Initial) Stephen G. Ruys			Date of Receipt
	Mailing Address 2336 N 90th Street			0 9 1 5 2 0 0 9
	City Wauwatosa	State WI	Zip Code 53226-1829	Transaction ID: 20090921-904-17-1
	FEC ID number of contributing federal political committee.	C	55220-1029	Amount of Each Receipt this Period 14.00
	Name of Employer NML	Occupation Dir IS	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 276.00	
	SUBTOTAL of Receipts This Page (optional)	1		236.00
	TOTAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 392 / 574 (check only one) X
(Any information copied from such Reports and or for commercial purposes, other than using the	Statements mane and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	nce Company	Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Stephen G. Ruys			Date of Receipt
	Mailing Address 2336 N 90th Street	Otata	7'- O. I.	09 / 30 / 2009
	City <u>Wauwatosa</u>	State WI	Zip Code 53226-1829	Transaction ID: 20091008104013-831 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		14.00
	Name of Employer NML	Occupatio Dir IS	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 276.00	
- 3.	Full Name (Last, First, Middle Initial) Stephen G. Ruys			Date of Receipt
	Mailing Address 2336 N 90th Street			10 15 2009
	City	State	Zip Code	Transaction ID: 20091015164625-830
	Wauwatosa FEC ID number of contributing federal political committee.	C	53226-1829	Amount of Each Receipt this Period 14.00
	Name of Employer NML	Occupatio Dir IS	n	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		276.00	
-).	Full Name (Last, First, Middle Initial) Stephen G. Ruys			Date of Receipt
	Mailing Address 2336 N 90th Street			10 31 7 2009
	City	State W1	Zip Code	Transaction ID: 20091105152628-830
	Wauwatosa FEC ID number of contributing federal political committee.	C	53226-1829	Amount of Each Receipt this Period 14.00
	Name of Employer NML	Occupatio Dir IS	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 276.00	
Γ	SUBTOTAL of Receipts This Page (optional)	1		42.00

	ULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 393 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information for for community	ation copied from such Reports and shercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\	OF COMMITTEE (In Full) orthwestern Mutual Life Insuran	ice Company	Federal PAC	
	ne (Last, First, Middle Initial) G. Ruys			Date of Receipt
	Address 2336 N 90th Street			11 15 2009
City Wauw	atosa	State WI	Zip Code 53226-1829	Transaction ID: 2009111816423-830 Amount of Each Receipt this Period
FEC ID	number of contributing political committee.	C		14.00
Name o	f Employer	Occupatio Dir IS	n	
	For: rimary General ther (specify) ▼		e Year-to-Date ▼ 276.00	
B. Robert F	ne (Last, First, Middle Initial) Sarnecki Address 16004 King Street			Date of Receipt
	Address 16004 King Street			07 15 2009
City	nd Park	State KS	Zip Code 66062-7508	Transaction ID: 20090720-1224-13-1
FEC ID	number of contributing political committee.	C	00002-7508	Amount of Each Receipt this Period 41.67
Name o RPS Fr	f Employer icl Grp Inc	Occupatio Special A		
	For: imary General ther (specify) ▼	, ' ' ' 	e Year-to-Date ▼ 1166.72	
	ne (Last, First, Middle Initial)			Date of Receipt
	Address 16004 King Street			07 31 2009
City	. I D. I	State	Zip Code	Transaction ID: 20090804-1221-10-0
FEC ID	nd Park number of contributing political committee.	C	66062-7508	Amount of Each Receipt this Period 41.67
Name o RPS Fr	f Employer cl Grp Inc	Occupatio Special A		
	For: rimary General ther (specify) ▼		e Year-to-Date ▼ 1166.72	
SUBTOTA	AL of Receipts This Page (optional) .			97.34
	his Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 394 / 574 (check only one) X
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insurar	nce Company	Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Robert P Sarnecki			Date of Receipt
	Mailing Address 16004 King Street			08 15 2009
	City Overland Park	State KS	Zip Code 66062-7508	Transaction ID: 20090819-46-14-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		41.67
	Name of Employer RPS Fncl Grp Inc	Occupatio Special A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1166.72	
- В.	Full Name (Last, First, Middle Initial) Robert P Sarnecki			Date of Receipt
	Mailing Address 16004 King Street			08 31 2009
	City	State	Zip Code	Transaction ID: 20090902-46-14-46
	Overland Park FEC ID number of contributing federal political committee.	KS C	66062-7508	Amount of Each Receipt this Period 41.67
	Name of Employer RPS Fncl Grp Inc	Occupatio Special A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1166.72	
С. С.	Full Name (Last, First, Middle Initial) Robert P Sarnecki			Date of Receipt
	Mailing Address 16004 King Street			09 15 2009
	City Overland Bark	State KS	Zip Code	Transaction ID: 20090921-47-16-16
	Overland Park FEC ID number of contributing federal political committee.	C	66062-7508	Amount of Each Receipt this Period 100.00
	Name of Employer RPS Fncl Grp Inc	Occupatio Special A		
	Receipt For: Primary General Other (specify) ▼	_ ' ' '	e Year-to-Date ▼ 1166.72	
	SUBTOTAL of Receipts This Page (optional) .			183.34
	TOTAL This Period (last page this line numbe		<u> </u>	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 395 / 574 (check only one) X
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	/ Federal PAC	
ا A .	Full Name (Last, First, Middle Initial) Robert P Sarnecki			Date of Receipt
	Mailing Address 16004 King Street	09 / 30 / 2009		
	City <u>Overland Park</u>	State KS	Zip Code 66062-7508	Transaction ID: 20091008103448-47
	FEC ID number of contributing federal political committee.	C	00002-7300	Amount of Each Receipt this Period
	Name of Employer RPS Fncl Grp Inc	Occupation Special A		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1166.72	
В.	Full Name (Last, First, Middle Initial) Robert P Sarnecki	<u> </u>		Date of Receipt
	Mailing Address 16004 King Street			10 15 2009
	City	State	Zip Code	Transaction ID: 2009102293957-47
	Overland Park	KS	66062-7508	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer RPS Fncl Grp Inc	Occupation Special A		
	Receipt For:	- ' ' '	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	1166.72	
C.	Full Name (Last, First, Middle Initial) Robert P Sarnecki			Date of Receipt
	Mailing Address 16004 King Street			10 31 2009
	City	State	Zip Code	Transaction ID: 20091105152043-47
	Overland Park FEC ID number of contributing federal political committee.	C	66062-7508	Amount of Each Receipt this Period 100.00
	Name of Employer RPS Fncl Grp Inc	Occupation Special A		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1166.72	
	SUBTOTAL of Receipts This Page (optional)			300.00
	TOTAL This Period (last page this line numbe		<u> </u>	

	PTS	for each category of the Detailed Summary Page	(check only one) X 11a
or for commercial purposes NAME OF COMMITTE	, other than using the name and	address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, N	·	,	Date of Receipt
	04 King Street		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Overland Park</u>	State KS	Zip Code 66062-7508	Transaction ID: 20091118163132-47
FEC ID number of contr federal political committee	ibuting	00002-7308	Amount of Each Receipt this Period 100.00
Name of Employer RPS Fncl Grp Inc	Occup. Specia	ation al Agent	
Receipt For: Primary Other (specify) ▼		gate Year-to-Date ▼ 1166.72	
Full Name (Last, First, N Joseph M Savino Mailing Address 8 Be			Date of Receipt
		7:a Code	07 15 2009
City Princeton	State NJ	Zip Code 08540-2227	Transaction ID: 20090720-1182-13-1 Amount of Each Receipt this Period
FEC ID number of contr federal political committee	ibuting		208.00
Name of Employer Self-Employed	Occup. Gener	ation ral Insurance Agent	
Receipt For: Primary Other (specify) ▼	General Aggree	gate Year-to-Date ▼ 4368.00	
Full Name (Last, First, N Joseph M Savino	Middle Initial)		Date of Receipt
Mailing Address 8 Be	nedek Road		07 31 YYYYY 2009
City	State	Zip Code	Transaction ID: 20090804-1180-10-0
Princeton	NJ	08540-2227	Amount of Each Receipt this Period
FEC ID number of contrept federal political committee			208.00
Name of Employer Self-Employed		al Insurance Agent	
Receipt For: Primary Other (specify) ▼	General Aggree	gate Year-to-Date ▼ 4368.00	
SUBTOTAL of Receipts T	his Page (optional)		516.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 397 / 574 (check only one) X 11a
A OI	ny information copied from such Reports and for commercial purposes, other than using the	Statements may ne name and add	r not be sold or used by any pers lress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	nce Company	Federal PAC	
۷.	Full Name (Last, First, Middle Initial) Joseph M Savino			Date of Receipt
	Mailing Address 8 Benedek Road			08 / 15 / 2009
	City Princeton	State NJ	Zip Code 08540-2227	Transaction ID: 20090819-5-14-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1 1	208.00
	Name of Employer Self-Employed	Occupation General I	n nsurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4368.00	
 3.	Full Name (Last, First, Middle Initial) Joseph M Savino			Date of Receipt
	Mailing Address 8 Benedek Road	08 31 2009		
	City	State	Zip Code	Transaction ID: 20090902-5-14-46
	Princeton FEC ID number of contributing federal political committee.	C	08540-2227	Amount of Each Receipt this Period 208.00
	Name of Employer Self-Employed	Occupation General I	n nsurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4368.00	
 ;.	Full Name (Last, First, Middle Initial) Joseph M Savino			Date of Receipt
	Mailing Address 8 Benedek Road			09 15 2009
	City Princeton	State NJ	Zip Code 08540-2227	Transaction ID: 20090921-5-16-16
	FEC ID number of contributing federal political committee.	C	00040-2221	Amount of Each Receipt this Period 208.00
	Name of Employer Self-Employed	Occupation General I	n nsurance Agent	
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 4368.00	
Г				624.00

Any information copied from such Reports and Statements may not be sold or used by any or for commercial purposes, other than using the name and address of any political commit or for commercial purposes, other than using the name and address of any political commit or for commercial purposes, other than using the name and address of any political commit or for commercial purposes, other than using the name and address of any political commit. A. Joseph M Savino Mailing Address 8 Benedek Road City State Zip Code NJ 08540-2227 FEC ID number of contributing federal political committee. Name of Employer Self-Employed General Insurance Agent Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Joseph M Savino Mailing Address 8 Benedek Road City State Zip Code NJ 08540-2227 FEC ID number of contributing federal political committee. Name of Employer General Other (specify) ▼ Cupation General Insurance Agent Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Cupation General Insurance Agent Aggregate Year-to-Date ▼ Princeton NJ 08540-2227 FEC ID number of contributing federal political committee. Cupation General Insurance Agent Aggregate Year-to-Date ▼ Princeton NJ 08540-2227 FEC ID number of contributing federal political committee. Cupation General Insurance Agent Aggregate Year-to-Date ▼ Princeton NJ 08540-2227 FEC ID number of contributing federal political committee. Cupation General Insurance Agent Aggregate Year-to-Date ▼ Primary General Insurance Agent Aggregate Year-to-Date ▼	FOR LINE NUMBER: PAGE 398 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
The Northwestern Mutual Life Insurance Company Federal PAC Full Name (Last, First, Middle Initial) Joseph M Savino Mailing Address 8 Benedek Road City State Zip Code Princeton NJ 08540-2227 FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Qeneral Other (specify) ▼ A368.00 Full Name (Last, First, Middle Initial) Joseph M Savino Mailing Address 8 Benedek Road City State Zip Code NJ 08540-2227 FEC ID number of contributing federal political committee. C State Zip Code NJ 08540-2227 FEC ID number of contributing federal political committee. Name of Employer Self-Employed General Insurance Agent Receipt For: Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Joseph M Savino Mailing Address 8 Benedek Road City State Zip Code NJ 08540-2227 FUI Name (Last, First, Middle Initial) Joseph M Savino Mailing Address 8 Benedek Road City State Zip Code NJ 08540-2227 FEC ID number of contributing federal political committee. C C Coccupation General Insurance Agent Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Joseph M Savino Mailing Address 8 Benedek Road City State Zip Code NJ 08540-2227 FEC ID number of contributing federal political committee. C C Coccupation General Insurance Agent Aggregate Year-to-Date ▼	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
A. Joseph M Savino Mailing Address 8 Benedek Road City State Zip Code Princeton NJ 08540-2227 FEC ID number of contributing federal political committee. Name of Employer Self-Employed General Other (specify) ▼	
City	Date of Receipt
Princeton Princeton Princeton PEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼ Princeton Princeton PEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼ Princeton Princeton NJ 08540-2227 PEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼ Princeton Receipt For: Primary General Other (specify) ▼ Princeton Receipt For: Princeton Receipt For: Princeton Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ C Princeton NJ 08540-2227 FEC ID number of contributing federal political committee. Princeton NJ 08540-2227 PEC ID number of contributing federal political committee. Princeton NJ 08540-2227 PEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Name of Employer Self-Employed Receipt For: Aggregate Year-to-Date ▼	09 30 2009
Name of Employer Self-Employed	Transaction ID: 20091008103448-5 Amount of Each Receipt this Period
Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Joseph M Savino Mailing Address 8 Benedek Road City Princeton State Primary State Princeton State Primary Self-Employed Receipt For: Primary Other (specify) ▼ C Full Name of Employer Self-Employed Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Joseph M Savino Mailing Address 8 Benedek Road City State Primary Seneral Other (specify) ▼ Full Name (Last, First, Middle Initial) Joseph M Savino Mailing Address 8 Benedek Road City Princeton Full Name (Last, First, Middle Initial) Joseph M Savino Mailing Address 8 Benedek Road City Princeton Full Name of Employer Self-Employed Receipt For: Name of Employer Self-Employed Receipt For: Aggregate Year-to-Date ▼ Occupation General Insurance Agent Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	208.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Joseph M Savino Mailing Address 8 Benedek Road City State Zip Code NJ 08540-2227 FEC ID number of contributing federal political committee. Name of Employer Self-Employed General Other (specify) ▼ Full Name (Last, First, Middle Initial) Joseph M Savino Mailing Address 8 Benedek Road City State Zip Code Receipt For: Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Joseph M Savino Mailing Address 8 Benedek Road City State Zip Code Princeton NJ 08540-2227 FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Name of Employer Self-Employed Receipt For: Aggregate Year-to-Date ▼	
Mailing Address 8 Benedek Road City State Zip Code Princeton NJ 08540-2227 FEC ID number of contributing federal political committee. Name of Employer Self-Employed General Insurance Agent Receipt For: Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Joseph M Savino Mailing Address 8 Benedek Road City State Zip Code NJ 08540-2227 FEC ID number of contributing federal political committee. Name of Employer Self-Employed Cocupation General Insurance Agent C C C State Zip Code NJ 08540-2227 C C C C C C C C C C C C C C C C C C C	
City State Zip Code Princeton NJ 08540-2227 FEC ID number of contributing federal political committee. Name of Employer Self-Employed General Insurance Agent Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Joseph M Savino Mailing Address 8 Benedek Road City State Zip Code Princeton NJ 08540-2227 FEC ID number of contributing federal political committee. Name of Employer Self-Employed General Insurance Agent Receipt For: Occupation General Insurance Agent Aggregate Year-to-Date ▼	Date of Receipt
Princeton FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Joseph M Savino Mailing Address 8 Benedek Road City State Zip Code Princeton NJ 08540-2227 FEC ID number of contributing federal political committee. Name of Employer Self-Employed C Cupation Cocupation General Insurance Agent C Occupation General Insurance Agent Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	10 15 2009
FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Joseph M Savino Mailing Address 8 Benedek Road City State Zip Code Princeton NJ 08540-2227 FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Aggregate Year-to-Date ▼ C C C C C C Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	Transaction ID: 2009102293957-5
Receipt For: Primary	Amount of Each Receipt this Period 208.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Joseph M Savino Mailing Address 8 Benedek Road City State Zip Code Princeton NJ 08540-2227 FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Occupation General Insurance Agent Aggregate Year-to-Date ▼	
C. Joseph M Savino Mailing Address 8 Benedek Road City State Zip Code Princeton NJ 08540-2227 FEC ID number of contributing federal political committee. Name of Employer Self-Employed General Insurance Agent Receipt For: Aggregate Year-to-Date ▼	
City State Zip Code Princeton NJ 08540-2227 FEC ID number of contributing federal political committee. Name of Employer Self-Employed General Insurance Agent Receipt For: Aggregate Year-to-Date ▼	Date of Receipt
Princeton NJ 08540-2227 FEC ID number of contributing federal political committee. C Name of Employer Self-Employed Occupation General Insurance Agent Receipt For: Aggregate Year-to-Date	10 31 YYYY 2009
FEC ID number of contributing federal political committee. Name of Employer Self-Employed C Occupation General Insurance Agent Receipt For: Aggregate Year-to-Date ▼	Transaction ID: 20091105152043-5 Amount of Each Receipt this Period
Receipt For: Aggregate Year-to-Date ▼	208.00
33 -3	
Other (specify) ▼ 4368.00	
SUBTOTAL of Receipts This Page (optional)	624.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 399 / 574 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	nd Statements may not be sold or used by any perso g the name and address of any political committee to rance Company Federal PAC	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Joseph M Savino Mailing Address 8 Benedek Road City Princeton FEC ID number of contributing	State Zip Code NJ 08540-2227	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary Other (specify) General	Occupation General Insurance Agent Aggregate Year-to-Date 4368.00	
Full Name (Last, First, Middle Initial) Timothy G. Schaefer Mailing Address 1013 E Lexington E City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
Whitefish Bay FEC ID number of contributing federal political committee. Name of Employer NML Receipt For:	Occupation Chief Information Officer Aggregate Year-to-Date	Amount of Each Receipt this Period 70.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Timothy G. Schaefer Mailing Address 1013 E Lexington E	1446.00	Date of Receipt
City Whitefish Bay FEC ID number of contributing federal political committee.	State Zip Code WI 53217-5381	0 7
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation Chief Information Officer Aggregate Year-to-Date ▼ 1446.00	
SUBTOTAL of Receipts This Page (options	al)	348.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 400 / 574 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and address of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Timothy G. Schaefer Mailing Address 1013 E Lexington Blv City Whitefish Bay FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53217-5381 C Occupation Chief Information Officer Aggregate Year-to-Date ▼ 1446.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Timothy G. Schaefer Mailing Address 1013 E Lexington Blv City Whitefish Bay FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53217-5381 C Occupation Chief Information Officer Aggregate Year-to-Date 1446.00	Date of Receipt M M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Timothy G. Schaefer Mailing Address 1013 E Lexington Blv City Whitefish Bay FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53217-5381 C Occupation Chief Information Officer Aggregate Year-to-Date 1446.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		210.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 401 / 574 (check only one) X 11a
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	ice Company	/ Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Timothy G. Schaefer			Date of Receipt
	Mailing Address 1013 E Lexington Blv	09 / 30 / 2009		
	City Whitefish Bay	State WI	Zip Code 53217-5381	Transaction ID: 20091008104013-868 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		70.00
	Name of Employer NML	Occupation Chief Info	ormation Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1446.00	
ь В.	Full Name (Last, First, Middle Initial) Timothy G. Schaefer Mailing Address 1013 E Lexington Blv			Date of Receipt
		10 15 2009		
	City Whitefish Bay	State WI	Zip Code 53217-5381	Transaction ID: 20091015164625-867 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		70.00
	Name of Employer NML	Occupation Chief Info	ormation Officer	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1446.00	
с.	Full Name (Last, First, Middle Initial) Timothy G. Schaefer			Date of Receipt
	Mailing Address 1013 E Lexington Blv	10 31 YYYYY 2009		
	City Whitefish Bay	State WI	Zip Code 53217-5381	Transaction ID: 20091105152628-867 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		70.00
	Name of Employer NML	Occupation Chief Info	ormation Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1446.00	
	SUBTOTAL of Receipts This Page (optional) .			210.00
	TOTAL This Period (last page this line number	r only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 402 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	ce Company	Federal PAC	
∠ 4.	Full Name (Last, First, Middle Initial) Timothy G. Schaefer			Date of Receipt
	Mailing Address 1013 E Lexington Blv			1 1 1 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 2009111816423-867
	Whitefish Bay	WI	53217-5381	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		70.00
	Name of Employer NML	Occupation Chief Info	rmation Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1446.00	
- 3.	Full Name (Last, First, Middle Initial) Cal D. Schattschneider	1		Date of Receipt
	Mailing Address 263 E Pine Hollow Lar	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 2009111816423-1046
	Oak Creek	WI	53154-7718	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		10.00
	Name of Employer NML	Occupation Dir - Nb L		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	
-).	Full Name (Last, First, Middle Initial) Thomas F. Scheer			Date of Receipt
	Mailing Address 4711 N Woodburn Stro	eet		07 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20090720-699-13-0
	Whitefish Bay	WI	53211-1127	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		18.00
	Name of Employer NML	Occupation Asst Gc 8	k Asst Sec	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	390.00	
	CURTOTAL of Descints This Dags (antional)	<u> </u>		98.00
-	SUBTOTAL of Receipts This Page (optional)		······	
	TOTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 403 / 574 (check only one) X
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ny information copied from such Reports and r for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may the name and add	not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insura	ance Company	Federal PAC	
۸.	Full Name (Last, First, Middle Initial) Thomas F. Scheer	Dina ai		Date of Receipt
	Mailing Address 4711 N Woodburn S	07 31 2009		
	City	State	Zip Code	Transaction ID: 20090804-698-10-0
	Whitefish Bay	WI	53211-1127	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		18.00
	Name of Employer NML	Occupation Asst Gc	n & Asst Sec	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		390.00	
 3.	Full Name (Last, First, Middle Initial) Thomas F. Scheer	Date of Receipt		
	Mailing Address 4711 N Woodburn S	08 15 7 9 9 9		
	City State		Zip Code	Transaction ID: 20090819-765-14-15
	Whitefish Bay	WI	53211-1127	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		18.00
	Name of Employer NML	Occupation Asst Gc 8	n & Asst Sec	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		390.00	
_	Full Name (Last, First, Middle Initial) Thomas F. Scheer			Date of Receipt
	Mailing Address 4711 N Woodburn S	0 8 3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 20090902-765-15-1
	Whitefish Bay	WI	53211-1127	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		18.00
	Name of Employer NML	- ' '	& Asst Sec	
	Receipt For:	Aggregate	Year-to-Date ▼	_
	Primary General Other (specify) ▼		390.00	
Γ				54.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and S	Statements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 404 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17		
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and ad	ddress of any political committee to	os solicit contributions from such committee.		
∠ A .	Full Name (Last, First, Middle Initial) Thomas F. Scheer Mailing Address 4711 N Woodburn Str	Thomas F. Scheer				
	City Whitefish Bay	State WI	Zip Code 53211-1127	Transaction ID: 20090921-760-17-1 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		18.00		
	Name of Employer NML Receipt For: Primary General Other (specify) ▼	1 1001 010	e Year-to-Date ▼			
В.	Full Name (Last, First, Middle Initial) Thomas F. Scheer Mailing Address 4711 N Woodburn Str	Date of Receipt 0 9 3 0 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7				
	City	State	Zip Code	Transaction ID: 20091008104013-687		
	Whitefish Bay FEC ID number of contributing federal political committee.	C	53211-1127	Amount of Each Receipt this Period 18.00		
	Name of Employer NML		& Asst Sec			
	Receipt For: Primary General Other (specify) ▼	Aggregat	e Year-to-Date ▼ 390.00			
C.	Full Name (Last, First, Middle Initial) Thomas F. Scheer Mailing Address 4711 N Woodburn Str	reet		Date of Receipt 1 0 1 5 2 0 0 9		
	City	State	Zip Code	Transaction ID: 20091015164625-686		
	Whitefish Bay FEC ID number of contributing federal political committee.	C	53211-1127	Amount of Each Receipt this Period 18.00		
	Name of Employer NML	Occupation Asst Gc	on & Asst Sec			
	Receipt For: Primary General Other (specify) ▼	Aggregat	e Year-to-Date ▼ 390.00			
	SUBTOTAL of Receipts This Page (optional) .			54.00		
	TOTAL This Period (last page this line number	r only)				

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 405/5/4 (check only one) X 11a			
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	<u>- </u>					
Full Name (Last, First, Middle Initial) Thomas F. Scheer			Date of Receipt			
	Mailing Address 4711 N Woodburn Street					
City Whitefish Bay	State WI	Zip Code 53211-1127	1 0 3 1 2 0 0 9 Transaction ID: 20091105152628-68 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		18.00			
Name of Employer NML	Occupation Asst Gc	n & Asst Sec				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 390.00				
Full Name (Last, First, Middle Initial) Thomas F. Scheer			Date of Receipt			
Mailing Address 4711 N Woodburn	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City Whitefish Bay	State WI	Zip Code 53211-1127	Transaction ID: 2009111816423-686 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		18.00			
Name of Employer NML	Occupation	n & Asst Sec				
Receipt For: Primary General Other (specify) ▼	- ' '	Year-to-Date ▼				
Full Name (Last, First, Middle Initial) John E. Schlifske			Date of Receipt			
Mailing Address 8253 N River Road	d		07 15 2009			
City River Hills	State WI	Zip Code 53217-2546	Transaction ID: 20090720-789-13-0 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	30217 2010	208.00			
Name of Employer NML	Occupation Presiden					
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 4368.00				
SUBTOTAL of Receipts This Page (option	al)		244.00			

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 406 / 574 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	and Statements may not be sold or used by any persong the name and address of any political committee to	
Full Name (Last, First, Middle Initial) John E. Schlifske Mailing Address 8253 N River Road	· · ·	Date of Receipt
City River Hills	State Zip Code WI 53217-2546	0 7 3 1 2 0 0 9 Transaction ID: 20090804-788-10-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	208.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation President Aggregate Year-to-Date 4368.00	
Full Name (Last, First, Middle Initial) John E. Schlifske Mailing Address 1500 Greenway Te	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City Elm Grove	State Zip Code WI 53122-1611	Transaction ID: 20090819-855-14-15 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 33122 1011	208.00
Name of Employer NML	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4368.00	
Full Name (Last, First, Middle Initial) John E. Schlifske Mailing Address 1500 Greenway Te	errace	Date of Receipt 0 8 3 1 2 0 0 9
City	State Zip Code	Transaction ID: 20090902-855-15-1
EIm Grove FEC ID number of contributing federal political committee.	WI 53122-1611	Amount of Each Receipt this Period 208.00
Name of Employer NML	Occupation President	7
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4368.00	
OUDTOTU /5	nal)	624.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 407/574 (check only one)		
Any information copied from such Reports or for commercial purposes, other than using	and Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins		· ·			
Full Name (Last, First, Middle Initial) John E. Schlifske			Date of Receipt		
City Elm Grove	State WI	Zip Code 53122-1611	0 9 1 5 2 0 0 9 Transaction ID: 20090921-850-17-1 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		208.00		
Name of Employer NML	Occupatio Presiden				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4368.00			
Full Name (Last, First, Middle Initial) John E. Schlifske	I		Date of Receipt		
Mailing Address 1500 Greenway T	0 9 3 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City Elm Grove	State WI	Zip Code 53122-1611	Transaction ID: 20091008104013-77 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		208.00		
Name of Employer NML	Occupatio Presiden				
Receipt For: Primary General Other (specify) ▼	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Year-to-Date ▼ 4368.00			
Full Name (Last, First, Middle Initial) John E. Schlifske			Date of Receipt		
City Elm Grove	State WI	Zip Code 53122-1611	1 0 1 5 2 0 0 9 Transaction ID: 20091015164625-77		
FEC ID number of contributing federal political committee.	C	33122-1011	Amount of Each Receipt this Period 208.00		
Name of Employer NML	Occupatio Presiden				
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4368.00			
SUBTOTAL of Receipts This Page (optio	nal)		624.00		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 408 / 574 (check only one) X
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements mand add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insura	nce Company	Federal PAC	
۷.	Full Name (Last, First, Middle Initial) John E. Schlifske			Date of Receipt
	Mailing Address 1500 Greenway Terra	ace		10 31 2009
	City	State	Zip Code	Transaction ID: 20091105152628-776
	Elm Grove	WI	53122-1611	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.00
	Name of Employer NML	Occupatio Presiden		
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼		4368.00	
- 3.	Full Name (Last, First, Middle Initial) John E. Schlifske			Date of Receipt
	Mailing Address 1500 Greenway Terra	1 1		
	City State		Zip Code	Transaction ID: 2009111816423-776
	Elm Grove	WI	53122-1611	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.00
	Name of Employer NML	Occupatio Presiden		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		4368.00	
_).	Full Name (Last, First, Middle Initial) Jeffrey S. Schlinsog			Date of Receipt
-	Mailing Address W73N412 Greystone	Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20090720-999-13-0
	Cedarburg	WI	53012-2281	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		24.00
	Name of Employer NML	Occupatio Dir Rese		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 480.00	
Г				440.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 409 / 574 (check only one) X 11a	
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	/ Federal PAC		
∠ A .	Full Name (Last, First, Middle Initial) Jeffrey S. Schlinsog			Date of Receipt	
	Mailing Address W73N412 Greystone	Drive		07 31 2009	
	City Cedarburg	State WI	Zip Code 53012-2281	Transaction ID: 20090804-997-10-0 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		24.00	
	Name of Employer NML	Occupation Dir Rese			
	Receipt For: Primary General Other (specify) ▼	- '	e Year-to-Date ▼ 480.00		
- В.	Full Name (Last, First, Middle Initial) Jeffrey S. Schlinsog	Deixa		Date of Receipt	
	Mailing Address W73N412 Greystone	<u>, </u>			
	City Cedarburg	State WI	Zip Code 53012-2281	Transaction ID: 20090819-1064-14-15 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		24.00	
	Name of Employer NML	Occupation Dir Rese			
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 480.00		
- C.	Full Name (Last, First, Middle Initial) Jeffrey S. Schlinsog			Date of Receipt	
•	Mailing Address W73N412 Greystone	Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City Cedarburg	State WI	Zip Code 53012-2281	Transaction ID: 20090902-1064-15-1 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C	33012-2201	24.00	
	Name of Employer NML	Occupation Dir Rese			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 480.00		
	SUBTOTAL of Receipts This Page (optional) .	1		72.00	
	TOTAL This Period (last page this line numbe	r only)			

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	fo	Jse separate schedule(s) or each category of the letailed Summary Page	FOR LINE NUMBER: PAGE 410 / 574 (check only one) X
,	Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not the name and address	be sold or used by any person of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	ance Company Fed	deral PAC	
۸.	Full Name (Last, First, Middle Initial) Jeffrey S. Schlinsog			Date of Receipt
	Mailing Address W73N412 Greyston	e Drive		09 15 2009
	City		Zip Code	Transaction ID: 20090921-1057-17-1
	Cedarburg	WI	53012-2281	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		24.00
	Name of Employer NML	Occupation Dir Research	1	
	Receipt For:	Aggregate Yea	ır-to-Date ▼	
	Primary General Other (specify) ▼		480.00	
_	Full Name (Last, First, Middle Initial) Jeffrey S. Schlinsog			Date of Receipt
	Mailing Address W73N412 Greyston	0 9 3 0 2 0 0 9		
	City State		Zip Code	Transaction ID: 20091008104013-983
	Cedarburg	WI	53012-2281	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		24.00
	Name of Employer NML	Occupation Dir Research	l	
	Receipt For:	Aggregate Yea	r-to-Date ▼	
	Primary General Other (specify) ▼	0 0 0	480.00	
_	Full Name (Last, First, Middle Initial) Jeffrey S. Schlinsog			Date of Receipt
	Mailing Address W73N412 Greyston	e Drive		10 15 2009
	City		Zip Code	Transaction ID: 20091015164625-982
	Cedarburg	WI	53012-2281	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		24.00
	Name of Employer NML	Occupation Dir Research		
	Receipt For:	Aggregate Yea	r-to-Date ▼	
	Primary General Other (specify) ▼	0 0 0	480.00	
Γ				72.00

ercial purposes, other than using OF COMMITTEE (In Full)	State Zip Code WI 53012-2281 C Occupation Dir Research Aggregate Year-to-Date 480.00	Date of Receipt Transaction ID: 20091105152628-982 Amount of Each Receipt this Period Date of Receipt 24.00 Date of Receipt Date of Receipt 1 0 2 0 0 9 Transaction ID: 20091105152628-982 Amount of Each Receipt this Period 24.00
rthwestern Mutual Life Insular (Last, First, Middle Initial) Schlinsog Address W73N412 Greyston urg number of contributing olitical committee. Employer For: mary General ner (specify) ue (Last, First, Middle Initial) Schlinsog	State Zip Code WI 53012-2281 C Occupation Dir Research Aggregate Year-to-Date ▼ 480.00	Transaction ID: 20091105152628-982 Amount of Each Receipt this Period 24.00 Date of Receipt M M M / D D / Y Y Y Y Y
Schlinsog Address W73N412 Greyston urg number of contributing olitical committee. Employer For: mary General ner (specify) all (Last, First, Middle Initial) Schlinsog	State Zip Code WI 53012-2281 C Occupation Dir Research Aggregate Year-to-Date 480.00	Transaction ID: 20091105152628-982 Amount of Each Receipt this Period 24.00 Date of Receipt M M M / D D / Y Y Y Y Y
urg number of contributing olitical committee. Employer For: mary General ner (specify) Ite (Last, First, Middle Initial) Schlinsog	State Zip Code WI 53012-2281 C Occupation Dir Research Aggregate Year-to-Date 480.00	Transaction ID: 20091105152628-982 Amount of Each Receipt this Period 24.00 Date of Receipt
number of contributing olitical committee. Employer For: mary General ner (specify) te (Last, First, Middle Initial) Schlinsog	Occupation Dir Research Aggregate Year-to-Date 480.00	Amount of Each Receipt this Period 24.00 Date of Receipt M M / D D / Y Y Y Y Y
number of contributing olitical committee. Employer For: mary General ner (specify) te (Last, First, Middle Initial) Schlinsog	Occupation Dir Research Aggregate Year-to-Date 480.00	Date of Receipt
olitical committee. Employer For: mary	Occupation Dir Research Aggregate Year-to-Date ▼ 480.00	Date of Receipt
For: mary General ner (specify) le (Last, First, Middle Initial) Schlinsog	Dir Research Aggregate Year-to-Date ▼ 480.00	M M / D D / Y Y Y Y
mary General ner (specify) le (Last, First, Middle Initial) Schlinsog	480.00	M M / D D / Y Y Y Y
ner (specify) ▼ le (Last, First, Middle Initial) Schlinsog		M ' M / D ' D / Y ' Y ' Y ' Y
Schlinsog	ne Drive	M M / D D / Y Y Y Y
	ne Drive	M M / D D / Y Y Y Y
	11 13 2009	
	State Zip Code	Transaction ID: 2009111816423-981
urg	WI 53012-2281	Amount of Each Receipt this Period
number of contributing olitical committee.	C	24.00
Employer	Occupation Dir Research	
For:	Aggregate Year-to-Date ▼	
mary General ner (specify) ▼	480.00	
ne (Last, First, Middle Initial) H. Schluter	I	Date of Receipt
Address 5057 N Palisades F	Road	07 15 2009
	State Zip Code	Transaction ID: 20090720-791-13-0
sh Bay	WI 53217-5756	Amount of Each Receipt this Period
number of contributing olitical committee.	C	31.00
Facilities and	Occupation VP & Tax Cnsl	
∟mpioyer	Aggregate Year-to-Date ▼	_
For:	054.00	
	651.00	-
	Employer for: nary General	Employer Occupation VP & Tax Cnsl or: Aggregate Year-to-Date ▼ nary General

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 412 / 574 (check only one) X
A 0	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insural	ne name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
. ∠ \.	Full Name (Last, First, Middle Initial) Kathleen H. Schluter			Date of Receipt
-	Mailing Address 5057 N Palisades Ro	ad		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20090804-790-10-0
	Whitefish Bay	WI	53217-5756	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		31.00
	Name of Employer NML	Occupation VP & Tax		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 651.00	
_	Full Name (Last, First, Middle Initial) Kathleen H. Schluter	<u> </u>		Date of Receipt
	Mailing Address 5057 N Palisades Ro	08 15 2009		
	City	State	Zip Code	Transaction ID: 20090819-857-14-15
	Whitefish Bay FEC ID number of contributing federal political committee.	C	53217-5756	Amount of Each Receipt this Period 31.00
	Name of Employer NML	Occupation VP & Tax		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	651.00	
	Full Name (Last, First, Middle Initial) Kathleen H. Schluter			Date of Receipt
	Mailing Address 5057 N Palisades Ro	ad		08 31 2009
	City Whitefish Bay	State WI	Zip Code 53217-5756	Transaction ID: 20090902-857-15-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33217-9796	31.00
	Name of Employer NML	Occupation VP & Tax		
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 651.00	
Γ	SUBTOTAL of Receipts This Page (optional)	1		93.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 413 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ce Company	/ Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Kathleen H. Schluter			Date of Receipt
	Mailing Address 5057 N Palisades Roa			09 / 15 / 2009
	City Whitefiah Roy	State WI	Zip Code	Transaction ID: 20090921-852-17-1
	Whitefish Bay	VVI	53217-5756	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		31.00
	Name of Employer NML	Occupation VP & Tax		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		651.00	
- В.	Full Name (Last, First, Middle Initial) Kathleen H. Schluter			Date of Receipt
	Mailing Address 5057 N Palisades Roa	ad		09 30 2009
	City	State	Zip Code	Transaction ID: 20091008104013-779
	Whitefish Bay	WI	53217-5756	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		31.00
	Name of Employer NML	Occupation VP & Tax		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		651.00	
- С.	Full Name (Last, First, Middle Initial) Kathleen H. Schluter			Date of Receipt
	Mailing Address 5057 N Palisades Roa	ad		10 15 2009
	City	State	Zip Code	Transaction ID: 20091015164625-778
	Whitefish Bay	WI	53217-5756	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		31.00
	Name of Employer NML	Occupation VP & Tax		7
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		651.00	
	SUBTOTAL of Receipts This Page (optional)	<u> </u>		93.00
}			<u> </u>	
- 1	TOTAL This Period (last page this line number	O(1119)		

ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 414 / 5 / 4 (check only one)	
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may g the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	rance Company	Federal PAC		
Full Name (Last, First, Middle Initial) Kathleen H. Schluter			Date of Receipt	
	Mailing Address 5057 N Palisades Road			
City Whitefish Bay	State WI	Zip Code 53217-5756	Transaction ID: 20091105152628-77 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		31.00	
Name of Employer NML	Occupatio VP & Tax			
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 651.00		
Full Name (Last, First, Middle Initial) Kathleen H. Schluter			Date of Receipt	
Mailing Address 5057 N Palisades Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City Whitefish Bay	State WI	Zip Code 53217-5756	Transaction ID: 2009111816423-778 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		31.00	
Name of Employer NML	Occupatio VP & Tax			
Receipt For: Primary General Other (specify) ▼	- 	e Year-to-Date ▼ 651.00		
Full Name (Last, First, Middle Initial) Calvin Robert Schmidt			Date of Receipt	
Mailing Address W205 Allen Road			07 15 2009	
City Oconomowoc	State WI	Zip Code 53066-9048	Transaction ID: 20090720-817-13-0	
FEC ID number of contributing federal political committee.	C	33000-9040	Amount of Each Receipt this Period 57.00	
Name of Employer NML	Occupatio VP Inv P			
Receipt For: Primary General Other (specify) ▼	- + +	Year-to-Date ▼ 693.00		
SUBTOTAL of Receipts This Page (options	al)		119.00	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 415 / 574 (check only one) X
,	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
/	The Northwestern Mutual Life Insurar	ice Company	Federal PAC	
۸.	Full Name (Last, First, Middle Initial) Calvin Robert Schmidt Mailing Address W205 Allen Road			Date of Receipt
	City	State	Zip Code	0 7 3 1 2 0 0 9 Transaction ID: 20090804-816-10-0
	Oconomowoc	WI	53066-9048	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		57.00
	Name of Employer NML	Occupatio VP Inv P		
	Receipt For: Primary General Other (specify) ▼	, '	e Year-to-Date ▼ 693.00	
 3.	Full Name (Last, First, Middle Initial) Calvin Robert Schmidt			Date of Receipt
	Mailing Address W205 Allen Road			08 15 2009
	City	State	Zip Code	Transaction ID: 20090819-883-14-15
	Oconomowoc	WI	53066-9048	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		57.00
	Name of Employer NML	Occupatio VP Inv P		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 693.00	
_	Full Name (Last, First, Middle Initial) Calvin Robert Schmidt			Date of Receipt
	Mailing Address W205 Allen Road			08 31 YYYYY 2009
	City	State	Zip Code	Transaction ID: 20090902-883-15-1
	Oconomowoc FEC ID number of contributing federal political committee.	C	53066-9048	Amount of Each Receipt this Period 57.00
	Name of Employer NML	Occupatio VP Inv P		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 693.00	
	SUBTOTAL of Receipts This Page (optional) .	1		171.00

SCHEDULE A (FEITEMIZED RECEIP	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 416 / 574 (check only one) X
or for commercial purposes, of NAME OF COMMITTEE	other than using the name and	address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Mic Calvin Robert Schmidt	·	,	Date of Receipt
Mailing Address W205			09 / 15 / Y Y Y Y Y
City Oconomowoc	State WI	Zip Code 53066-9048	Transaction ID: 20090921-878-17-1 Amount of Each Receipt this Period
FEC ID number of contrib federal political committee			57.00
Name of Employer NML	Occupa VP Inv	ation r Prod Ops	
Receipt For: Primary Other (specify)	Aggreg eneral	ate Year-to-Date ▼ 693.00	
Full Name (Last, First, Mic Calvin Robert Schmidt	,		Date of Receipt
Mailing Address W205	Allen Road		09 / 30 / 2009
City Oconomowoc	State WI	Zip Code 53066-9048	Transaction ID: 20091008104013-805
FEC ID number of contrib federal political committee	uting	33000-9040	Amount of Each Receipt this Period 57.00
Name of Employer NML	Occupa VP Inv	ation Prod Ops	
Receipt For: Primary Other (specify) ▼	Aggreg eneral	ate Year-to-Date ▼ 693.00	
Full Name (Last, First, Mic Calvin Robert Schmidt	ddle Initial)		Date of Receipt
Mailing Address W205	Allen Road		10 15 2009
City	State	Zip Code	Transaction ID: 20091015164625-804
Oconomowoc FEC ID number of contrib federal political committee		53066-9048	Amount of Each Receipt this Period 57.00
Name of Employer NML	Occupa VP Inv	ation Prod Ops	7
Receipt For: Primary Other (specify)	Aggreg	ate Year-to-Date ▼ 693.00	
SUBTOTAL of Receipts Th	is Page (optional)		171.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 417 / 574 (check only one) X
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma ne name and ad	ly not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	nce Company	/ Federal PAC	
∠ A .	Full Name (Last, First, Middle Initial) Calvin Robert Schmidt			Date of Receipt
	Mailing Address W205 Allen Road			10 31 7 2009
	City Oconomowoc	State WI	Zip Code 53066-9048	Transaction ID: 20091105152628-804 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		57.00
	Name of Employer NML	Occupation VP Inv P		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 693.00	
– В.	Full Name (Last, First, Middle Initial) Calvin Robert Schmidt			Date of Receipt
	Mailing Address W205 Allen Road			1 1 1 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 2009111816423-804
	Oconomowoc FEC ID number of contributing federal political committee.	C	53066-9048	Amount of Each Receipt this Period 57.00
	Name of Employer NML	Occupation VP Inv P		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 693.00	
_ С.	Full Name (Last, First, Middle Initial) Rodd Schneider			Date of Receipt
	Mailing Address 1415 E Fairy Chasm	R		07 15 YYYYY 2009
	City Bayside	State WI	Zip Code 53217	Transaction ID: 20090720-543-13-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33217	27.00
	Name of Employer NML	Occupation VP & Lit		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 627.00	
	SUBTOTAL of Receipts This Page (optional)			141.00
	TOTAL This Period (last page this line number		<u> </u>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 418 / 574 (check only one) X
A ₁	ny information copied from such Reports and for commercial purposes, other than using the	Statements ma ne name and ad	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insural	nce Company	/ Federal PAC	
∠_ A.	Full Name (Last, First, Middle Initial) Rodd Schneider			Date of Receipt
	Mailing Address 1415 E Fairy Chasm	R		07 31 7 2009
	City Bayside	State WI	Zip Code 53217	Transaction ID: 20090804-543-10-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		27.00
	Name of Employer NML	Occupation VP & Lit		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 627.00	
— В.	Full Name (Last, First, Middle Initial) Rodd Schneider			Date of Receipt
	Mailing Address 1415 E Fairy Chasm	08 15 2009		
	City Bayside	State WI	Zip Code 53217	Transaction ID: 20090819-611-14-15
	FEC ID number of contributing federal political committee.	C	33217	Amount of Each Receipt this Period 27.00
	Name of Employer NML	Occupation VP & Lit		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 627.00	
 C.	Full Name (Last, First, Middle Initial) Rodd Schneider			Date of Receipt
	Mailing Address 1415 E Fairy Chasm	R		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Bayside	State WI	Zip Code 53217	Transaction ID: 20090902-611-15-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33217	27.00
	Name of Employer NML	Occupation VP & Lit		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 627.00	
s	SUBTOTAL of Receipts This Page (optional)	1		81.00
	OTAL This Period (last page this line number	er only)	•	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 419 / 574 (check only one) X 11a
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	ly not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	y Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Rodd Schneider			Date of Receipt
	Mailing Address 1415 E Fairy Chasm	R		09 / 15 / 2009
	City <u>Bayside</u>	State WI	Zip Code 53217	Transaction ID: 20090921-609-17-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		27.00
	Name of Employer NML	Occupation VP & Lit		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 627.00	
ь. В.	Full Name (Last, First, Middle Initial) Rodd Schneider			Date of Receipt
	Mailing Address 1415 E Fairy Chasm	09 30 7 2009		
	City <u>Bayside</u>	State WI	Zip Code 53217	Transaction ID: 20091008104013-535 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		27.00
	Name of Employer NML	Occupation VP & Lit		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 627.00	
с. С.	Full Name (Last, First, Middle Initial) Rodd Schneider			Date of Receipt
-	Mailing Address 1415 E Fairy Chasm	R		M M / D D / Y Y Y Y Y 1 Y 1 1 5 2 0 0 9
	City Bayside	State WI	Zip Code 53217	Transaction ID: 20091015164625-534
	FEC ID number of contributing federal political committee.	C	33217	Amount of Each Receipt this Period 27.00
	Name of Employer NML	Occupation VP & Lit		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 627.00	
	SUBTOTAL of Receipts This Page (optional)	1		81.00
Ì	TOTAL This Period (last page this line numbe	r only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 420 / 574 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	and Statements may not be sold or used by any person g the name and address of any political committee to urance Company Federal PAC	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Rodd Schneider Mailing Address 1415 E Fairy Chas	sm R	Date of Receipt
City Bayside FEC ID number of contributing	State Zip Code WI 53217	1 0 3 1 2 0 0 9 Transaction ID: 20091105152628-534 Amount of Each Receipt this Period
federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation VP & Lit Cnsl Aggregate Year-to-Date ▼ 627.00	27.00
Full Name (Last, First, Middle Initial) Rodd Schneider Mailing Address 1415 E Fairy Chas	sm R	Date of Receipt 1 1 1 5 2 0 0 9
City Bayside FEC ID number of contributing	State Zip Code WI 53217	Transaction ID: 2009111816423-535 Amount of Each Receipt this Period
federal political committee. Name of Employer NML Receipt For: Primary General	Occupation VP & Lit Cnsl Aggregate Year-to-Date ▼	27.00
Full Name (Last, First, Middle Initial) Todd M. Schoon Mailing Address 923 E Kilbourn Ave	627.00	Date of Receipt
City	State Zip Code	0 7 1 5 2 0 0 9 Transaction ID: 20090720-1112-13-0
Milwaukee FEC ID number of contributing federal political committee.	WI 53202-3493	Amount of Each Receipt this Period 208.00
Name of Employer NML	Occupation Sr VP Agencies	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4368.00	
SUBTOTAL of Receipts This Page (option	al)	262.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 421 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Ar	y information copied from such Reports and for commercial purposes, other than using t NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	Statements may not be sold or used by any pene name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
\angle		Tibe Company i ederal i AC	
١.	Full Name (Last, First, Middle Initial) Todd M. Schoon	Date of Receipt	
	Mailing Address 923 E Kilbourn Ave #	ŧ U	07 31 7 2009
	City Milwaukee	State Zip Code WI 53202-3493	Transaction ID: 20090804-1110-10-0
	FEC ID number of contributing federal political committee.	WI 53202-3493	Amount of Each Receipt this Period 208.00
	Name of Employer NML	Occupation Sr VP Agencies	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4368.00	
 s.	Full Name (Last, First, Middle Initial) Todd M. Schoon		Date of Receipt
	Mailing Address 923 E Kilbourn Aven	08 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State Zip Code	Transaction ID: 20090819-1176-14-15
	Milwaukee FEC ID number of contributing federal political committee.	WI 53202-3493	Amount of Each Receipt this Period 208.00
	Name of Employer NML	Occupation Sr VP Agencies	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4368.00	
	Full Name (Last, First, Middle Initial) Todd M. Schoon		Date of Receipt
	Mailing Address 923 E Kilbourn Aven	ue U	08 31 2009
	City Milwaukee	State Zip Code WI 53202-3493	Transaction ID: 20090902-1176-15-1
	FEC ID number of contributing federal political committee.	C 33202-3493	Amount of Each Receipt this Period 208.00
	Name of Employer NML	Occupation Sr VP Agencies	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4368.00	
	UBTOTAL of Receipts This Page (optional)		624.00

	SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	for each ca	oto oobodulo(o)	FOR LINE NUMBER: PAGE 422 / 574 (check only one) X
	Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	he name and address of any po	olitical committee to so	or the purpose of soliciting contributions
∠ A .	Full Name (Last, First, Middle Initial) Todd M. Schoon			Date of Receipt
	Mailing Address 923 E Kilbourn Aver	ue U		09 15 2009
	City	State Zip Code		Transaction ID: 20090921-1165-17-1
	Milwaukee	WI 53202-3	493	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.00
	Name of Employer NML	Occupation Sr VP Agencies		
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date	4368.00	
_ 3.	Full Name (Last, First, Middle Initial) Todd M. Schoon			Date of Receipt
	Mailing Address 923 E Kilbourn Aver	$ \begin{bmatrix} \begin{smallmatrix} M & M \\ D & G \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ G & G \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & D & G \end{smallmatrix} \end{bmatrix} $		
	City	State Zip Code		Transaction ID: 20091008104013-1092
	Milwaukee FEC ID number of contributing federal political committee.	WI 53202-3	493	Amount of Each Receipt this Period 208.00
	Name of Employer NML	Occupation Sr VP Agencies		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	4368.00	
-).	Full Name (Last, First, Middle Initial) Todd M. Schoon Mailing Address 923 E Kilbourn Aver	ue U		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	1	1 0 1 5 2 0 0 9 Transaction ID: 20091015164625-1090
	<u>Milwaukee</u>	WI 53202-3		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.00
	Name of Employer NML	Occupation Sr VP Agencies		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	4368.00	
	SUBTOTAL of Receipts This Page (optional)		······	624.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 423 / 574 (check only one) X
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	and Statements may not be sold or used by any persong the name and address of any political committee to urance Company Federal PAC	n for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Todd M. Schoon Mailing Address 923 F Kilbourn Av	remus II	Date of Receipt
Mailing Address 923 E Kilbourn Av City Milwaukee	State Zip Code WI 53202-3493	Transaction ID: 20091105152628-109 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	208.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation Sr VP Agencies Aggregate Year-to-Date ▼ 4368.00	
Full Name (Last, First, Middle Initial) Todd M. Schoon Mailing Address 923 E Kilbourn Av	venue U	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 2009111816423-1089
<u>Milwaukee</u>	WI 53202-3493	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	208.00
Name of Employer NML	Occupation Sr VP Agencies	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4368.00	
Full Name (Last, First, Middle Initial) Brad P Seitzinger	•	Date of Receipt
Mailing Address 1672 Chieftan Cir	cle	07 15 2009
City	State Zip Code	Transaction ID: 20090720-1227-13-1
Oxford FEC ID number of contributing federal political committee.	MI 48371-6095	Amount of Each Receipt this Period 42.00
Name of Employer Seitzinger Fncl Gp Inc	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 932.00	
SUBTOTAL of Receipts This Page (optio	nal)	458.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 424/5/4 (check only one) X 11a
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions oslicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	ance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Brad P Seitzinger			Date of Receipt
Mailing Address 1672 Chieftan Circle	e		07 31 2009
City Oxford	State MI	Zip Code 48371-6095	Transaction ID: 20090804-1224-10-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer Seitzinger Fncl Gp Inc	Occupation Special A		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 932.00	
Full Name (Last, First, Middle Initial) Brad P Seitzinger			Date of Receipt
Mailing Address 1672 Chieftan Circle	Э		0 8 1 5 2 0 0 9
City Oxford	State MI	Zip Code 48371-6095	Transaction ID: 20090819-49-14-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer Seitzinger Fncl Gp Inc	Occupation Special A		
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 932.00	
Full Name (Last, First, Middle Initial) Brad P Seitzinger			Date of Receipt
Mailing Address 1672 Chieftan Circle	9		0 8 3 1 2 0 0 9
City Oxford	State MI	Zip Code 48371-6095	Transaction ID: 20090902-49-14-46 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1007 1000	42.00
Name of Employer Seitzinger Fncl Gp Inc	Occupation Special A		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 932.00	
SUBTOTAL of Receipts This Page (optional	l)		126.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 425 / 574 (check only one) X
[Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements mage name and add	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insuran	ce Company	/ Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Brad P Seitzinger			Date of Receipt
	Mailing Address 1672 Chieftan Circle	Stato	Zip Code	0 9 1 5 2 0 0 9 T T T T T T T T T T T T T T T T T
	City Oxford	State MI	48371-6095	Transaction ID: 20090921-50-16-16 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		52.00
	Name of Employer Seitzinger Fncl Gp Inc	Occupation Special A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 932.00	
– В.	Full Name (Last, First, Middle Initial) Brad P Seitzinger			Date of Receipt
	Mailing Address 1672 Chieftan Circle	09 30 2009		
	City	State	Zip Code	Transaction ID: 20091008103448-50
	Oxford FEC ID number of contributing federal political committee.	C	48371-6095	Amount of Each Receipt this Period 52.00
	Name of Employer Seitzinger Fncl Gp Inc	Occupatio Special A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 932.00	
с. С.	Full Name (Last, First, Middle Initial) Brad P Seitzinger			Date of Receipt
	Mailing Address 1672 Chieftan Circle			10 15 2009
	City Oxford	State MI	Zip Code 48371-6095	Transaction ID: 2009102293957-50 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40071 0000	52.00
	Name of Employer Seitzinger Fncl Gp Inc	Occupation Special A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 932.00	
	SUBTOTAL of Receipts This Page (optional)	1		156.00
F	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 426 / 574 (check only one)			
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	rance Company	Federal PAC				
Full Name (Last, First, Middle Initial) Brad P Seitzinger			Date of Receipt			
City Oxford	State MI	Zip Code 48371-6095	Transaction ID: 20091105152043-50 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		52.00			
Name of Employer Seitzinger Fncl Gp Inc	Occupatio Special A					
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 932.00				
Full Name (Last, First, Middle Initial) Brad P Seitzinger	I		Date of Receipt			
Mailing Address 1672 Chieftan Circl	e		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City Oxford	State MI	Zip Code 48371-6095	Transaction ID: 20091118163132-50 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		52.00			
Name of Employer Seitzinger Fncl Gp Inc	Occupatio Special A					
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 932.00				
Full Name (Last, First, Middle Initial) Catherine L. Shaw			Date of Receipt			
Mailing Address 7720 Rogers Avenu	ne		11 15 2009			
City Wauwatosa	State WI	Zip Code 53213-1748	Transaction ID: 2009111816423-897			
FEC ID number of contributing federal political committee.	C	33213-1740	Amount of Each Receipt this Period			
Name of Employer NML	Occupatio Asst Gc	n & Asst Sec				
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 210.00				
SUBTOTAL of Receipts This Page (optional	al)		114.00			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 427 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma ne name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	nce Company	/ Federal PAC	
Α.	Full Name (Last, First, Middle Initial) David W. Simbro			Date of Receipt
	Mailing Address 311 E Erie Street Un	07 15 2009		
	City Milwaukee	State WI	Zip Code 53202-6040	Transaction ID: 20090720-1101-13-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33202 3040	35.00
	Name of Employer NML	Occupation VP Life I		7
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 675.00	
В.	Full Name (Last, First, Middle Initial) David W. Simbro	7.4		Date of Receipt
	Mailing Address 311 E Erie Street Un	07 31 7 2009		
	City Milwaukee	State WI	Zip Code 53202-6040	Transaction ID: 20090804-1099-10-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33202-0040	35.00
	Name of Employer NML	Occupation VP Life I		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 675.00	
с. С.	Full Name (Last, First, Middle Initial) David W. Simbro			Date of Receipt
	Mailing Address 311 E Erie Street Un	it 4		08 15 2009
	City Milwaukee	State WI	Zip Code 53202-6040	Transaction ID: 20090819-1165-14-15 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33202-0040	35.00
	Name of Employer NML	Occupation VP Life I		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 675.00	
	SUBTOTAL of Receipts This Page (optional)			105.00
İ	TOTAL This Period (last page this line number	er only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 428 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insural	Statements may not be sold or used by any persone name and address of any political committee to nce Company Federal PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) David W. Simbro Mailing Address 311 E Erie Street Uni City Milwaukee FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53202-6040 C Occupation VP Life Products Aggregate Year-to-Date 675.00	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) David W. Simbro Mailing Address 311 E Erie Street Uni City Milwaukee FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53202-6040 C Occupation VP Life Products Aggregate Year-to-Date 675.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) David W. Simbro Mailing Address 311 E Erie Street Uni City Milwaukee FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53202-6040 C Occupation VP Life Products Aggregate Year-to-Date 675.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 20091008104013-108 Amount of Each Receipt this Period 35.00
SUBTOTAL of Receipts This Page (optional)		105.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 429 / 574 (check only one) X
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	ice Company	/ Federal PAC	
Α.	Full Name (Last, First, Middle Initial) David W. Simbro			Date of Receipt
	Mailing Address 311 E Erie Street Unit	: 4		10 15 2009
	City Milwaukee	State WI	Zip Code 53202-6040	Transaction ID: 20091015164625-1079 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		35.00
	Name of Employer NML	Occupation VP Life I		
	Receipt For: ☐ Primary ☐ General Other (specify) ▼		e Year-to-Date ▼ 675.00	
- В.	Full Name (Last, First, Middle Initial) David W. Simbro			Date of Receipt
	Mailing Address 311 E Erie Street Unit	10 31 2009		
	City Milwaukee	State WI	Zip Code 53202-6040	Transaction ID: 20091105152628-1079
	FEC ID number of contributing federal political committee.	C	33202-0040	Amount of Each Receipt this Period 35.00
	Name of Employer NML	Occupation VP Life F		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 675.00	
- С.	Full Name (Last, First, Middle Initial) David W. Simbro			Date of Receipt
	Mailing Address 311 E Erie Street Unit	: 4		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Milwaukee	State WI	Zip Code 53202-6040	Transaction ID: 2009111816423-1078 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00202 0040	35.00
	Name of Employer NML	Occupation VP Life F		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 675.00	
	SUBTOTAL of Receipts This Page (optional) .			105.00
ļ	TOTAL This Period (last page this line numbe		<u> </u>	

ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 430 / 5 / 4 (check only one)			
Any information copied from such Reports at or for commercial purposes, other than using	nd Statements may g the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	rance Company	Federal PAC				
Full Name (Last, First, Middle Initial) Paul W. Skalecki			Date of Receipt			
-						
City Cedarburg	State WI	Zip Code 53012	Transaction ID: 20090720-904-13-0 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		25.00			
Name of Employer NML	Occupation VP Uw S					
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 525.00				
Full Name (Last, First, Middle Initial) Paul W. Skalecki			Date of Receipt			
Mailing Address W69N463 Fox Poir	nte A		0 7 3 1 2 0 0 9			
City Cedarburg	State WI	Zip Code 53012	Transaction ID: 20090804-902-10-0 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		25.00			
Name of Employer NML	Occupation VP IIw S	n Itandards				
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 525.00				
Full Name (Last, First, Middle Initial) Paul W. Skalecki			Date of Receipt			
Mailing Address W69N463 Fox Poir	nte A		0 8 1 5 2 0 0 9			
City Cedarburg	State WI	Zip Code 53012	Transaction ID: 20090819-969-14-1 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	00012	25.00			
Name of Employer NML	Occupation VP Uw S	n Itandards				
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 525.00				
SUBTOTAL of Receipts This Page (optional			75.00			

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 431 / 574 (check only one) X 11a
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma ne name and ad	ly not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Compan	y Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Paul W. Skalecki			Date of Receipt
	Mailing Address W69N463 Fox Pointe	08 31 4 2009		
	City <u>Cedarburg</u>	State WI	Zip Code 53012	Transaction ID: 20090902-969-15-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer NML	Occupation VP Uw S	on Standards	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 525.00	
Б.	Full Name (Last, First, Middle Initial) Paul W. Skalecki			Date of Receipt
	Mailing Address W69N463 Fox Pointe	09 15 2009		
	City Cedarburg	State WI	Zip Code	Transaction ID: 20090921-964-17-1
	FEC ID number of contributing federal political committee.	C	53012	Amount of Each Receipt this Period 25.00
	Name of Employer NML	Occupation VP Uw S	on Standards	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 525.00	
С. С.	Full Name (Last, First, Middle Initial) Paul W. Skalecki			Date of Receipt
	Mailing Address W69N463 Fox Pointe	e A		09 30 Y Y Y Y Y Y
	City Cedarburg	State WI	Zip Code 53012	Transaction ID: 20091008104013-891 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30012	25.00
	Name of Employer NML	Occupation VP Uw S	on Standards	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 525.00	
	SUBTOTAL of Receipts This Page (optional)	1		75.00
f	TOTAL This Period (last page this line number			

ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 432 / 574 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	nd Statements may not be sold or used by any person the name and address of any political committee to rance Company Federal PAC	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Paul W. Skalecki Mailing Address W69N463 Fox Poir	nte A	Date of Receipt
City Cedarburg FEC ID number of contributing	State Zip Code WI 53012	Transaction ID: 20091015164625-890 Amount of Each Receipt this Period 25.00
Receipt For: Primary Other (specify)	Occupation VP Uw Standards Aggregate Year-to-Date ▼ 525.00	23.00
Full Name (Last, First, Middle Initial) Paul W. Skalecki Mailing Address W69N463 Fox Poir	nte A	Date of Receipt
City Cedarburg	State Zip Code WI 53012	Transaction ID: 20091105152628-890 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer NML	Occupation VP Uw Standards	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	
Full Name (Last, First, Middle Initial) Paul W. Skalecki		Date of Receipt
Mailing Address W69N463 Fox Poir	ite A	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Cedarburg	State Zip Code WI 53012	Transaction ID: 2009111816423-890
FEC ID number of contributing federal political committee.	C 33012	Amount of Each Receipt this Period 25.00
Name of Employer NML	Occupation VP Uw Standards	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 433 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person e name and address of any political committee to s	n for the purpose of soliciting contributions
The Northwestern Mutual Life Insurar Full Name (Last, First, Middle Initial)	ice Company Federal PAC	
Mark W. Smith		Date of Receipt
Mailing Address 614 Park Crest Drive		07 15 2009
City	State Zip Code	Transaction ID: 20090720-906-13-0
Thiensville	WI 53092-1423	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer NML	Occupation Asst Gc & Asst Sec	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 489.00	
Full Name (Last, First, Middle Initial) Mark W. Smith	1	Date of Receipt
Mailing Address 614 Park Crest Drive		0 7 3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20090804-904-10-0
Thiensville	WI 53092-1423	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer NML	Occupation Asst Gc & Asst Sec	1
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 489.00	
Full Name (Last, First, Middle Initial) Mark W. Smith		Date of Receipt
Mailing Address 614 Park Crest Drive		08 15 YYYY 2009
City	State Zip Code	Transaction ID: 20090819-971-14-15
Thiensville	WI 53092-1423	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer NML	Occupation Asst Gc & Asst Sec	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	489.00	
SUBTOTAL of Receipts This Page (optional) .	·····	75.00
TOTAL This Period (last page this line number	r only)	

I	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 434 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
_	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	The Northwestern Mutual Life Insurance	ce Company	Federal PAC	
A.	Full Name (Last, First, Middle Initial) Mark W. Smith Mailing Address 614 Park Crest Drive			Date of Receipt
	Mailing Address 614 Park Crest Drive City	State	Zip Code	0 8 3 1 2 0 0 9 Transaction ID: 20090902-971-15-1
	Thiensville	WI	53092-1423	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer NML	Occupation Asst Gc	n & Asst Sec	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 489.00	
- В.	Full Name (Last, First, Middle Initial) Mark W. Smith			Date of Receipt
	Mailing Address 614 Park Crest Drive			09 15 7 2009
	City	State	Zip Code	Transaction ID: 20090921-966-17-1
	Thiensville	WI	53092-1423	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer NML	Occupation Asst Gc	n & Asst Sec	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		489.00	
с. С.	Full Name (Last, First, Middle Initial) Mark W. Smith			Date of Receipt
	Mailing Address 614 Park Crest Drive			09 / 30 / 2009
	City	State	Zip Code	Transaction ID: 20091008104013-893
	Thiensville	WI	53092-1423	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer NML	Occupation Asst Gc	n & Asst Sec	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		489.00	
	SUBTOTAL of Receipts This Page (optional)	ı		75.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 435 / 574 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	I Statements may not be sold or used by any personal statements and address of any political committee to the company Federal PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mark W. Smith Mailing Address 614 Park Crest Drive)	Date of Receipt
City Thiensville FEC ID number of contributing	State Zip Code WI 53092-1423	Transaction ID: 20091015164625-892 Amount of Each Receipt this Period 25.00
federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation Asst Gc & Asst Sec Aggregate Year-to-Date 489.00	23.00
Full Name (Last, First, Middle Initial) Mark W. Smith Mailing Address 614 Park Crest Drive		Date of Receipt 1 0 3 1 2 0 0 9
City Thiensville FEC ID number of contributing	State Zip Code WI 53092-1423	Transaction ID: 20091105152628-892 Amount of Each Receipt this Period
federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	Occupation Asst Gc & Asst Sec Aggregate Year-to-Date 489.00	25.00
Full Name (Last, First, Middle Initial) Mark W. Smith Mailing Address 614 Park Crest Drive)	Date of Receipt
City Thiensville FEC ID number of contributing federal political committee.	State Zip Code WI 53092-1423 C	Transaction ID: 2009111816423-892 Amount of Each Receipt this Period 25.00
Name of Employer NML Receipt For:	Occupation Asst Gc & Asst Sec Aggregate Year-to-Date	
Primary General Other (specify)	Aggregate Year-to-Date 489.00	
SUBTOTAL of Receipts This Page (optional)		75.00

IT	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 436 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Si for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may name and add	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insurance	e Company	Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Richard P. Snyder			Date of Receipt
	Mailing Address 909 Fairview Avenue			08 / 31 / 2009
	City	State	Zip Code	Transaction ID: 20090902-737-15-1
	South Milwaukee	WI	53172-1719	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer NML	Occupation Dir Distri	n bution PIng	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		279.00]
— В.	Full Name (Last, First, Middle Initial) Richard P. Snyder			Date of Receipt
	Mailing Address 909 Fairview Avenue			09 15 2009
	City	State	Zip Code	Transaction ID: 20090921-733-17-1
	South Milwaukee	WI	53172-1719	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer NML	Occupation Dir Distri	n bution PIng	
	Receipt For:	Aggregate	e Year-to-Date	
	Primary General Other (specify) ▼		279.00	
 C.	Full Name (Last, First, Middle Initial) Richard P. Snyder			Date of Receipt
	Mailing Address 909 Fairview Avenue			09 30 2009
	City	State	Zip Code	Transaction ID: 20091008104013-660
	South Milwaukee	WI	53172-1719	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer NML	Occupation Dir Distri	n bution PIng	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		279.00	
SI	UBTOTAL of Receipts This Page (optional)			45.00
	OTAL This Period (last page this line number of		<u> </u>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 437/574 (check only one)
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	ance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Richard P. Snyder			Date of Receipt
Mailing Address 909 Fairview Avenu	е		10 15 2009
City South Milwaukee	State WI	Zip Code 53172-1719	Transaction ID: 20091015164625-659 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer NML	Occupatio Dir Distri	n bution PIng	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 279.00	
Full Name (Last, First, Middle Initial) Richard P. Snyder			Date of Receipt
Mailing Address 909 Fairview Avenu	e		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City South Milwaukee	State WI	Zip Code 53172-1719	Transaction ID: 20091105152628-65 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00172 17 10	15.00
Name of Employer NML	Occupatio Dir Distri	n bution Plng	
Receipt For: Primary General Other (specify) ▼	- , '	e Year-to-Date ▼ 279.00	
Full Name (Last, First, Middle Initial) Richard P. Snyder			Date of Receipt
Mailing Address 909 Fairview Avenu	е		M M / D D / Y Y Y Y Y 1 1 1 1 5 2 0 0 9
City South Milwaukee	State WI	Zip Code 53172-1719	Transaction ID: 2009111816423-659 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer NML	Occupatio Dir Distri	n bution Plng	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 279.00	
SUBTOTAL of Receipts This Page (optional)		45.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 438 / 574 (check only one) X
A	ny information copied from such Reports and ror commercial purposes, other than using t	Statements ma he name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	ince Company	/ Federal PAC	
∠ A.	Full Name (Last, First, Middle Initial) Steve P. Sperka			Date of Receipt
	Mailing Address S68W18088 Island I	Orive		07 31 YYYYY 2009
	City Muskego	State WI	Zip Code 53150-9090	Transaction ID: 20090804-820-10-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer NML	Occupation VP Ltc	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 315.00	
— В.	Full Name (Last, First, Middle Initial) Steve P. Sperka			Date of Receipt
	Mailing Address S67W17735 Copper	08 / 15 / 4 2009		
	City Muskego	State WI	Zip Code 53150-7503	Transaction ID: 20090819-887-14-15 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer NML	Occupation VP Ltc	on	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 315.00	
 C.	Full Name (Last, First, Middle Initial) Steve P. Sperka			Date of Receipt
- .	Mailing Address S67W17735 Copper	Oak		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Muskego	State WI	Zip Code 53150-7503	Transaction ID: 20090902-887-15-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30130 7300	15.00
	Name of Employer NML	Occupation VP Ltc	on	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 315.00	
\[\frac{1}{5}\]	SUBTOTAL of Receipts This Page (optional)			45.00
	FOTAL This Period (last page this line numb			

or for commercial purposes, other than usi NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins Full Name (Last, First, Middle Initial) Steve P. Sperka Mailing Address S67W17735 Cop City Muskego FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Steve P. Sperka Mailing Address S67W17735 Cop City Muskego FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Receipt For: Primary General Other (specify) ▼	State Zip Code WI 53150-7503 C Occupation VP Ltc Aggregate Year-to-Date ▼ 315.00 Oer Oak State Zip Code WI 53150-7503 C	Date of Receipt Date of Receipt Transaction ID: 20090921-882-17-1 Amount of Each Receipt this Period Date of Receipt
Full Name (Last, First, Middle Initial) Steve P. Sperka Mailing Address S67W17735 Cop City Muskego FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Steve P. Sperka Mailing Address S67W17735 Cop City Muskego FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Steve P. Sperka Full Name (Last, First, Middle Initial) Steve P. Sperka	State Zip Code WI 53150-7503 C Occupation VP Ltc Aggregate Year-to-Date ▼ 315.00 Oer Oak State Zip Code WI 53150-7503 C	Date of Receipt Date of Re
Mailing Address S67W17735 Cop City Muskego FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Steve P. Sperka Mailing Address S67W17735 Cop City Muskego FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Steve P. Sperka	State Zip Code WI 53150-7503 C Occupation VP Ltc Aggregate Year-to-Date ▼ 315.00 Der Oak State Zip Code WI 53150-7503 C	Date of Receipt Date of Re
Muskego FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Steve P. Sperka Mailing Address S67W17735 Cop City Muskego FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Steve P. Sperka	WI 53150-7503 C Occupation VP Ltc Aggregate Year-to-Date ▼ 315.00 Deer Oak State Zip Code WI 53150-7503 C	Amount of Each Receipt this Period 15.00 Date of Receipt M M J D D J 2 0 0 9 Transaction ID: 20091008104013-809 Amount of Each Receipt this Period
federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Steve P. Sperka Mailing Address S67W17735 Cop City Muskego FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Steve P. Sperka	Occupation VP Ltc Aggregate Year-to-Date 315.00 Der Oak State Zip Code WI 53150-7503 C	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Steve P. Sperka Mailing Address S67W17735 Cop City Muskego FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Steve P. Sperka	VP Ltc Aggregate Year-to-Date ▼ 315.00 Der Oak State Zip Code WI 53150-7503 C	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Steve P. Sperka Mailing Address S67W17735 Cop City Muskego FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Steve P. Sperka	oer Oak State Zip Code WI 53150-7503	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Steve P. Sperka Mailing Address S67W17735 Cop City Muskego FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Steve P. Sperka	State Zip Code WI 53150-7503	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Muskego FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Steve P. Sperka	WI 53150-7503	Transaction ID: 20091008104013-809 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Steve P. Sperka	C	
Name of Employer NML Receipt For:		
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Steve P. Sperka	Occupation VP Ltc	
Steve P. Sperka	Aggregate Year-to-Date ▼ 315.00	
	I	Date of Receipt
Mailing Address S67W17735 Cop	per Oak	10 15 2009
City Muskego	State Zip Code WI 53150-7503	Transaction ID: 20091015164625-808 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer NML	Occupation VP Ltc	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	
SUBTOTAL of Receipts This Page (optic	nal)	45.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 440 / 574 (check only one) X
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma	ly not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insural	nce Compan	y Federal PAC	
∠ A .	Full Name (Last, First, Middle Initial) Steve P. Sperka			Date of Receipt
	Mailing Address S67W17735 Copper	Oak		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Muskego	State WI	Zip Code 53150-7503	Transaction ID: 20091105152628-808 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer NML	Occupation VP Ltc	on	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 315.00	
Б.	Full Name (Last, First, Middle Initial) Steve P. Sperka	0-1-		Date of Receipt
	Mailing Address S67W17735 Copper	11 1 15 2009		
	City Muskego	State WI	Zip Code 53150-7503	Transaction ID: 2009111816423-808 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer NML	Occupation VP Ltc	on	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 315.00	
с.	Full Name (Last, First, Middle Initial) Robert L Spinks			Date of Receipt
	Mailing Address 305 Waterbury Cove			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Jackson	State MS	Zip Code 39232-8692	Transaction ID: 20090720-1189-13-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	03202 0032	25.00
	Name of Employer Self-Employed	Occupation General	on Insurance Agent	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 610.00	
	SUBTOTAL of Receipts This Page (optional)	<u> </u>		55.00
f	TOTAL This Period (last page this line number	er only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 441 / 574 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	name and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Robert L Spinks Mailing Address 305 Waterbury Cove		Date of Receipt
City Jackson FEC ID number of contributing	State Zip Code MS 39232-8692	0 7 3 1 2 0 0 9 Transaction ID: 20090804-1187-10-0 Amount of Each Receipt this Period
Receipt For: Primary General	Occupation General Insurance Agent Aggregate Year-to-Date 610.00	25.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Robert L Spinks Mailing Address 305 Waterbury Cove	0 0 0 0 0 0 0 0	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City Jackson FEC ID number of contributing federal political committee.	State Zip Code MS 39232-8692	Amount of Each Receipt this Period 25.00
Name of Employer Self-Employed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation General Insurance Agent Aggregate Year-to-Date 610.00	
Full Name (Last, First, Middle Initial) Robert L Spinks Mailing Address 305 Waterbury Cove		Date of Receipt
City Jackson FEC ID number of contributing federal political committee.	State Zip Code MS 39232-8692	Transaction ID: 20090902-12-14-46 Amount of Each Receipt this Period 25.00
Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼	Occupation General Insurance Agent Aggregate Year-to-Date 610.00	
SUBTOTAL of Receipts This Page (optional)	_	75.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 442/5/4 (check only one) X 11a
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may g the name and add	not be sold or used by any perso ress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	rance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Robert L Spinks			Date of Receipt
Mailing Address 305 Waterbury Cov	ve		0 9 1 5 2 0 0 9
City Jackson	State MS	Zip Code 39232-8692	Transaction ID: 20090921-12-16-16 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer Self-Employed	Occupation General I	n nsurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 610.00	
Full Name (Last, First, Middle Initial) Robert L Spinks			Date of Receipt
Mailing Address 305 Waterbury Co	ve		09 30 2009
City Jackson	State MS	Zip Code 39232-8692	Transaction ID: 20091008103448-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer Self-Employed	Occupation General I	nsurance Agent	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 610.00]
Full Name (Last, First, Middle Initial) Robert L Spinks			Date of Receipt
Mailing Address 305 Waterbury Cov	ve		10 15 2009
City Jackson	State MS	Zip Code 39232-8692	Transaction ID: 2009102293957-12 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	03232 0032	42.00
Name of Employer Self-Employed	Occupation General I	nsurance Agent	
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 610.00	
SUBTOTAL of Receipts This Page (optional			126.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 443 / 574 (check only one) X
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	/ Federal PAC	
A .	Full Name (Last, First, Middle Initial) Robert L Spinks			Date of Receipt
	Mailing Address 305 Waterbury Cove			10 31 2009
	City <u>Jackson</u>	State MS	Zip Code 39232-8692	Transaction ID: 20091105152043-12 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Self-Employed	Occupation General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 610.00	
– В.	Full Name (Last, First, Middle Initial) Robert L Spinks	<u> </u>		Date of Receipt
	Mailing Address 305 Waterbury Cove	11 15 2009		
	City	State	Zip Code	Transaction ID: 20091118163132-12
	Jackson	MS	39232-8692	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	610.00	
- >.	Full Name (Last, First, Middle Initial) Paul J. Steffen			Date of Receipt
	Mailing Address 10502 N Stone Creek			07 15 2009
	City Meguon	State W1	Zip Code 53092-5463	Transaction ID: 20090720-544-13-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30032 3403	50.00
	Name of Employer NML	Occupation VP Agen		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1050.00	
	SUBTOTAL of Receipts This Page (optional)	•		134.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 444 / 574 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	he name and add	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Paul J. Steffen Mailing Address 10502 N Stone Creel	k State	7in Codo	Date of Receipt 0 7 3 1 2 0 0 9
City Mequon FEC ID number of contributing federal political committee.	WI	Zip Code 53092-5463	Transaction ID: 20090804-544-10-0 Amount of Each Receipt this Period 50.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupatio VP Agen Aggregate]
Full Name (Last, First, Middle Initial) Paul J. Steffen Mailing Address 10502 N Stone Cree	k		Date of Receipt 0 8 1 5 2 0 0 9
City Mequon FEC ID number of contributing	State WI	Zip Code 53092-5463	Transaction ID: 20090819-612-14-15 Amount of Each Receipt this Period 50.00
Name of Employer NML Receipt For: Primary General	Occupatio VP Agen		
Full Name (Last, First, Middle Initial) Paul J. Steffen Mailing Address 10502 N Stone Cree	k		Date of Receipt
City Mequon FEC ID number of contributing federal political committee.	State WI	Zip Code 53092-5463	0 8 3 1 2 0 0 9 Transaction ID: 20090902-612-15-1 Amount of Each Receipt this Period 50.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupatio VP Agen Aggregate		
SUBTOTAL of Receipts This Page (optional))	150.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 445 / 574 (check only one) X
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	name and ad	dress of any political committee to	on for the purpose of soliciting contributions
2	Full Name (Last, First, Middle Initial)	e Company	/ redetal FAC	
Α.	Paul J. Steffen Mailing Address 10502 N Stone Creek	Date of Receipt 0 9 1 5 2 0 0 9		
	City <u>Mequon</u>	State WI	Zip Code 53092-5463	Transaction ID: 20090921-610-17-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer NML	Occupatio VP Agen		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1050.00	
- В.	Full Name (Last, First, Middle Initial) Paul J. Steffen			Date of Receipt
	Mailing Address 10502 N Stone Creek City	State	Zip Code	0 9 3 0 2 0 0 9 Transaction ID: 20091008104013-536
	<u>Meguon</u>	WI	53092-5463	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer NML	Occupatio VP Agen		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1050.00	
с. С.	Full Name (Last, First, Middle Initial) Paul J. Steffen			Date of Receipt
	Mailing Address 10502 N Stone Creek			10 15 2009
	City Meguon	State WI	Zip Code 53092-5463	Transaction ID: 20091015164625-535 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33032 3400	50.00
	Name of Employer NML	Occupatio VP Agen		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1050.00	
	SUBTOTAL of Receipts This Page (optional)			150.00
	TOTAL This Period (last page this line number	only)		

ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 446/5/4 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	rance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Paul J. Steffen			Date of Receipt
Mailing Address 10502 N Stone Cre	eek		10 31 2009
City Mequon	State WI	Zip Code 53092-5463	Transaction ID: 20091105152628-53 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer NML	Occupation VP Agen		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1050.00	
Full Name (Last, First, Middle Initial) Paul J. Steffen			Date of Receipt
Mailing Address 10502 N Stone Cre	M M / D D / Y Y Y Y Y 1 1 1 5 2 0 0 9		
City Mequon	State WI	Zip Code 53092-5463	Transaction ID: 2009111816423-536 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30032 3400	50.00
Name of Employer NML	Occupation VP Agen		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1050.00	
Full Name (Last, First, Middle Initial) Jason Steigman			Date of Receipt
Mailing Address 2301 E Newton Av	enue		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Shorewood	State WI	Zip Code 53211-2617	Transaction ID: 20090720-631-13-0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33211-2017	30.00
Name of Employer NML	Occupation Managing	n g Director	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 570.00	
SUBTOTAL of Receipts This Page (options	- I		130.00

111	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 447 / 574 (check only one) X
or 1	y information copied from such Reports and for commercial purposes, other than using th NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	ne name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
. <u>/_</u> A.	Full Name (Last, First, Middle Initial) Jason Steigman		, rederait 7.0	Date of Receipt
	Mailing Address 2301 E Newton Aven	ue		0 7 3 1 2 0 0 9
	City Shorewood	State WI	Zip Code 53211-2617	Transaction ID: 20090804-631-10-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		30.00
	Name of Employer NML	Occupatio Managin	n g Director	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 570.00	
3.	Full Name (Last, First, Middle Initial) Jason Steigman Mailing Address 2301 E Newton Aven	ue		Date of Receipt
	City	State	Zip Code	0 8 1 5 2 0 0 9 Transaction ID: 20090819-698-14-15
	Shorewood	WI	53211-2617	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer NML	Occupatio Managin	n g Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 570.00	
 }.	Full Name (Last, First, Middle Initial) Jason Steigman			Date of Receipt
	Mailing Address 2301 E Newton Aven	ue		08 31 2009
	City Shorewood	State WI	Zip Code 53211-2617	Transaction ID: 20090902-698-15-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer NML	Occupatio Managin	n g Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 570.00	
SI	JBTOTAL of Receipts This Page (optional)			90.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 448 / 574 (check only one) X 11a
A	ny information copied from such Reports and for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ice Company	Federal PAC	
	Full Name (Last, First, Middle Initial) Jason Steigman			Date of Receipt
	Mailing Address 2301 E Newton Avenu	ne		09 15 2009
	City	State	Zip Code	Transaction ID: 20090921-694-17-1
	Shorewood	WI	53211-2617	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer NML	Occupatio Managin	n g Director	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼ 570.00	7
_	Other (specify)	0 0	070.00	
	Full Name (Last, First, Middle Initial) Jason Steigman			Date of Receipt
	Mailing Address 2301 E Newton Avenu	09 30 2009		
	City	State	Zip Code	Transaction ID: 20091008104013-620
	Shorewood	WI	53211-2617	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer NML	Occupatio Managin	n g Director	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary ☐ General Other (specify) ▼		570.00	
_	Full Name (Last, First, Middle Initial) Jason Steigman			Date of Receipt
	Mailing Address 2301 E Newton Avenu	ıe		10 15 2009
	City	State	Zip Code	Transaction ID: 20091015164625-619
	Shorewood	WI	53211-2617	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer NML	Occupatio Managin	n g Director	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	570.00	
		1		90.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 449 / 574 (check only one) X 11a
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	nd Statements may not be sold or used by any pe g the name and address of any political committee rance Company Federal PAC	erson for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Jason Steigman Mailing Address 2301 F Newton Av		Date of Receipt
Mailing Address 2301 E Newton Av City Shorewood	State Zip Code WI 53211-2617	Transaction ID: 20091105152628-619 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation Managing Director Aggregate Year-to-Date 570.00	
Full Name (Last, First, Middle Initial) Jason Steigman Mailing Address 2301 E Newton Av	enue	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 2009111816423-619
Shorewood	WI 53211-2617	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer NML	Occupation Managing Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 570.00	
Full Name (Last, First, Middle Initial) David G. Stoeffel	'	Date of Receipt
Mailing Address 6311 N Lake Drive		07
City	State Zip Code	Transaction ID: 20090720-907-13-0
Whitefish Bay FEC ID number of contributing federal political committee.	WI 53217-4343	Amount of Each Receipt this Period 29.00
Name of Employer NML	Occupation VP Invest Prod Ln	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	
SUBTOTAL of Receipts This Page (option	al)	89.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 450 / 574 (check only one) X 11a
,	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ice Company	Federal PAC	
ے A .	Full Name (Last, First, Middle Initial) David G. Stoeffel			Date of Receipt
	Mailing Address 6311 N Lake Drive			07 31 7 2009
	City Whitefish Bay	State WI	Zip Code 53217-4343	Transaction ID: 20090804-905-10-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		29.00
	Name of Employer NML	Occupatio VP Inves	n st Prod Ln	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 585.00	
_ В.	Full Name (Last, First, Middle Initial) David G. Stoeffel			Date of Receipt
	Mailing Address 6311 N Lake Drive			08 / 15 / 2009
	City Whitefish Bay	State WI	Zip Code 53217-4343	Transaction ID: 20090819-972-14-15
	FEC ID number of contributing federal political committee.	C	33217-4343	Amount of Each Receipt this Period 29.00
	Name of Employer NML	Occupatio VP Inves	n st Prod Ln	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 585.00	
_ С.	Full Name (Last, First, Middle Initial) David G. Stoeffel			Date of Receipt
	Mailing Address 6311 N Lake Drive			0 8 3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Whitefish Bay	State WI	Zip Code 53217-4343	Transaction ID: 20090902-972-15-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30217-4040	29.00
	Name of Employer NML	Occupatio VP Inves	n st Prod Ln	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 585.00	
	SUBTOTAL of Receipts This Page (optional)	1		87.00
	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 451 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	nd Statements may not be sold or used by any person the name and address of any political committee to rance Company Federal PAC	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) David G. Stoeffel Mailing Address 6311 N Lake Drive		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Whitefish Bay	State Zip Code WI 53217-4343	Transaction ID: 20090921-967-17-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer NML	Occupation	29.00
Receipt For: Primary General Other (specify) ▼	VP Invest Prod Ln Aggregate Year-to-Date ▼ 585.00	
Full Name (Last, First, Middle Initial) David G. Stoeffel Mailing Address 6311 N Lake Drive		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Whitefish Bay	State Zip Code WI 53217-4343	0 9 3 0 2 0 0 9 Transaction ID: 20091008104013-894 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	29.00
Name of Employer NML	Occupation VP Invest Prod Ln	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	
Full Name (Last, First, Middle Initial) David G. Stoeffel Mailing Address 6311 N Lake Drive		Date of Receipt M
City Whitefish Bay	State Zip Code WI 53217-4343	Transaction ID: 20091015164625-893 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	29.00
Name of Employer NML	Occupation VP Invest Prod Ln	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	
SUBTOTAL of Receipts This Page (options	al)	87.00
TOTAL This Period (last page this line num	nber only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 452 / 574 (check only one) X
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ice Company	/ Federal PAC	
Α.	Full Name (Last, First, Middle Initial) David G. Stoeffel			Date of Receipt
	Mailing Address 6311 N Lake Drive			10 31 2009
	City Whitefish Bay	State WI	Zip Code 53217-4343	Transaction ID: 20091105152628-893 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		29.00
	Name of Employer NML	Occupation VP Invest	on St Prod Ln	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 585.00	
В.	Full Name (Last, First, Middle Initial) David G. Stoeffel			Date of Receipt
	Mailing Address 6311 N Lake Drive			11 15 2009
	City	State	Zip Code	Transaction ID: 2009111816423-893
	Whitefish Bay FEC ID number of contributing federal political committee.	C	53217-4343	Amount of Each Receipt this Period 29.00
	Name of Employer NML	Occupation VP Invest	on st Prod Ln	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 585.00	
C.	Full Name (Last, First, Middle Initial) Stephen Robert Stone			Date of Receipt
	Mailing Address N58 W24851 Cardina	I		07 15 2009
	City	State	Zip Code	Transaction ID: 20090720-697-13-0
	Susex FEC ID number of contributing federal political committee.	C	53089	Amount of Each Receipt this Period 15.00
	Name of Employer NML	Occupation Dir Inv A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 351.00	
	SUBTOTAL of Receipts This Page (optional) .	1		73.00
	TOTAL This Period (last page this line number	r only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 453 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	e Company	/ Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Stephen Robert Stone			Date of Receipt
	Mailing Address N58 W24851 Cardinal			07 31 7 2009
	City	State	Zip Code	Transaction ID: 20090804-696-10-0
	Susex	WI	53089	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer NML	Occupation Dir Inv A		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	351.00	
- В.	Full Name (Last, First, Middle Initial) Stephen Robert Stone			Date of Receipt
	Mailing Address N58 W24851 Cardinal			08 15 2009
	City	State	Zip Code	Transaction ID: 20090819-763-14-15
	Sussex	WI	53089	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		15.00
	Name of Employer NML	Occupation Dir Inv A		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	351.00	
- С.	Full Name (Last, First, Middle Initial) Stephen Robert Stone			Date of Receipt
.	Mailing Address N58 W24851 Cardinal			08 31 2009
	City	State	Zip Code	Transaction ID: 20090902-763-15-1
	Sussex	WI	53089	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer NML	Occupation Dir Inv A		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		351.00	
ſ	SUPTOTAL of Descipts This Daws (anti)			45.00
}	SUBTOTAL of Receipts This Page (optional)		<u> </u>	
	TOTAL This Period (last page this line number of	oniy)		

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 454 / 574 (check only one) X
0	any information copied from such Reports and r for commercial purposes, other than using t	Statements ma he name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	nce Company	/ Federal PAC	
۷.	Full Name (Last, First, Middle Initial) Stephen Robert Stone			Date of Receipt
	Mailing Address N58 W24851 Cardin	al 		09 / 15 / 2009
	City <u>Sussex</u>	State WI	Zip Code 53089	Transaction ID: 20090921-758-17-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer NML	Occupation Dir Inv A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 351.00	
- s.	Full Name (Last, First, Middle Initial) Stephen Robert Stone	-		Date of Receipt
	Mailing Address N58 W24851 Cardin	al		09 30 2009
	City	State	Zip Code	Transaction ID: 20091008104013-685
	Sussex	WI	53089	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer NML	Occupation Dir Inv A		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		351.00	
. –	Full Name (Last, First, Middle Initial) Stephen Robert Stone			Date of Receipt
	Mailing Address N58 W24851 Cardin	al		10 15 2009
	City Sussex	State WI	Zip Code 53089	Transaction ID: 20091015164625-684
	FEC ID number of contributing federal political committee.	C	33009	Amount of Each Receipt this Period 15.00
	Name of Employer NML	Occupation Dir Inv A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 351.00	
	SUBTOTAL of Receipts This Page (optional)	<u> </u>		45.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 455 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	and Statements may not be sold or used by any pers g the name and address of any political committee t urance Company Federal PAC	son for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Stephen Robert Stone Mailing Address N58 W24851 Card	linel	Date of Receipt
City Sussex	State Zip Code WI 53089	1 0 3 1 2 0 0 9 Transaction ID: 20091105152628-684 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		15.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation Dir Inv Acctg Aggregate Year-to-Date 351.00	
Full Name (Last, First, Middle Initial) Stephen Robert Stone Mailing Address N58 W24851 Card	linal	Date of Receipt 1 1 1 1 5 2 0 0 9
City	State Zip Code	Transaction ID: 2009111816423-684
Sussex	WI 53089	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	15.00
Name of Employer NML	Occupation Dir Inv Acctg	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 351.00	
Full Name (Last, First, Middle Initial) Richard A. Strait	•	Date of Receipt
Mailing Address 9086 N Tennyson	Drive	07 15 2009
City	State Zip Code	Transaction ID: 20090720-1098-13-0
Bayside FEC ID number of contributing federal political committee.	WI 53217-1967	Amount of Each Receipt this Period 25.00
Name of Employer NML	Occupation Managing Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 465.00	
SUBTOTAL of Receipts This Page (option	al)	55.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 456 / 574 (check only one) X
7	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insuran	ice Company	/ Federal PAC	
∠ A.	Full Name (Last, First, Middle Initial) Richard A. Strait			Date of Receipt
	Mailing Address 9086 N Tennyson Driv	ve		07 31 2009
	City	State	Zip Code	Transaction ID: 20090804-1096-10-0
	Bayside	WI	53217-1967	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer NML	Occupation Managin	on g Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 465.00	
_ B.	Full Name (Last, First, Middle Initial) Richard A. Strait			Date of Receipt
	Mailing Address 9086 N Tennyson Driv	08 15 2009		
	City	State	Zip Code	Transaction ID: 20090819-1162-14-15
	Bayside	WI	53217-1967	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer NML	Occupation Managin	on g Director	
	Receipt For:	Aggregate	e Year-to-Date	
	Primary General Other (specify) ▼	0 0	465.00	
-).	Full Name (Last, First, Middle Initial) Richard A. Strait			Date of Receipt
	Mailing Address 9086 N Tennyson Driv	ve		08 31 2009
	City	State	Zip Code	Transaction ID: 20090902-1162-15-1
	Bayside	WI	53217-1967	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer NML	Occupation Managin	on g Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 465.00	
	SUBTOTAL of Receipts This Page (optional) .			75.00
上	TOTAL This Period (last page this line number			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 457 / 574 (check only one) X
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements mane name and ad	ly not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insural	nce Compan	y Federal PAC	
A.	Full Name (Last, First, Middle Initial) Richard A. Strait			Date of Receipt
	Mailing Address 9086 N Tennyson Dri	0 9 1 5 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City Bayside	State WI	Zip Code 53217-1967	Transaction ID: 20090921-1152-17-1
	FEC ID number of contributing federal political committee.	C	33217-1307	Amount of Each Receipt this Period 25.00
	Name of Employer NML	Occupation	on ng Director	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 465.00	
В.	Full Name (Last, First, Middle Initial) Richard A. Strait	Date of Receipt		
	Mailing Address 9086 N Tennyson Dri	09 30 2009		
	City <u>Bayside</u>	State WI	Zip Code 53217-1967	Transaction ID: 20091008104013-1079
	FEC ID number of contributing federal political committee.	C	55217-1907	Amount of Each Receipt this Period 25.00
	Name of Employer NML	Occupation Managin	on ng Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 465.00	
с. С.	Full Name (Last, First, Middle Initial) Richard A. Strait			Date of Receipt
	Mailing Address 9086 N Tennyson Dri	Mailing Address 9086 N Tennyson Drive		
	City	State	Zip Code	Transaction ID: 20091015164625-1077
	Bayside FEC ID number of contributing federal political committee.	C	53217-1967	Amount of Each Receipt this Period 25.00
	Name of Employer NML	Occupation Managin	on ng Director	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 465.00	
	SUBTOTAL of Receipts This Page (optional)			75.00
ļ	TOTAL This Period (last page this line number	er only)		

SCHEDULE A (FEC Form	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 458 / 574 (check only one) X
NAME OF COMMITTEE (In Full)	ts and Statements may not be sold or used by any personsing the name and address of any political committee to	
Full Name (Last, First, Middle Initial) Richard A. Strait Mailing Address 9086 N Tennys	· · ·	Date of Receipt
City Bayside	State Zip Code WI 53217-1967	Transaction ID: 20091105152628-107 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation Managing Director Aggregate Year-to-Date 465.00	
Full Name (Last, First, Middle Initial) Richard A. Strait Mailing Address 9086 N Tennys	on Drive	Date of Receipt 1 1 1 5 2 0 0 9
City	State Zip Code	Transaction ID: 2009111816423-1076
Bayside	WI 53217-1967	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer NML	Occupation Managing Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 465.00	
Full Name (Last, First, Middle Initial) Steven J. Stribling		Date of Receipt
Mailing Address 11830 W Whita	ker Avenue	08 / 15 / 2009
City Greenfield	State Zip Code WI 53228-2455	Transaction ID: 20090819-1179-14-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer NML	Occupation Director - Di Benefits	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 291.00	
SUBTOTAL of Receipts This Page (op	tional)	65.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 459 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
0	any information copied from such Reports and r for commercial purposes, other than using the such as a suc	Statements ma he name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	nce Company	/ Federal PAC	
Д. А.	Full Name (Last, First, Middle Initial) Steven J. Stribling			Date of Receipt
	Mailing Address 11830 W Whitaker A			08 / 31 / 2009
	City	State	Zip Code	Transaction ID: 20090902-1179-15-1
	Greenfield	WI	53228-2455	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer NML	Occupation Director	n - Di Benefits	
	Receipt For:	Aggregate	e Year-to-Date	
	Primary General Other (specify) ▼		291.00	
— В.	Full Name (Last, First, Middle Initial) Steven J. Stribling			Date of Receipt
	Mailing Address 11830 W Whitaker A	09 / 15 / 2009		
	City	State	Zip Code	Transaction ID: 20090921-1168-17-1
	Greenfield	WI	53228-2455	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer NML	Occupation Director	n - Di Benefits	
	Receipt For:	Aggregate	e Year-to-Date	
	Primary General Other (specify) ▼		291.00]
— С.	Full Name (Last, First, Middle Initial) Steven J. Stribling			Date of Receipt
	Mailing Address 11830 W Whitaker A	venue		09 / 30 / Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20091008104013-1095
	Greenfield	WI	53228-2455	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer NML	Occupation Director	n - Di Benefits	7
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		291.00	
	SUBTOTAL of Receipts This Page (optional)			45.00
t	TOTAL This Period (last page this line number			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 460 / 574 (check only one) X
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ce Company	/ Federal PAC	
Δ. Α.	Full Name (Last, First, Middle Initial) Steven J. Stribling			Date of Receipt
	Mailing Address 11830 W Whitaker Av	10 15 2009		
	City	State	Zip Code	Transaction ID: 20091015164625-1093
	Greenfield	WI	53228-2455	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer NML	Occupation Director	on - Di Benefits	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		291.00	
- В.	Full Name (Last, First, Middle Initial) Steven J. Stribling			Date of Receipt
	Mailing Address 11830 W Whitaker Av	10 31 2009		
	City	State	Zip Code	Transaction ID: 20091105152628-1093
	Greenfield	WI	53228-2455	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer NML	Occupation Director	on - Di Benefits	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		291.00	
- C.	Full Name (Last, First, Middle Initial) Steven J. Stribling			Date of Receipt
O .	Mailing Address 11830 W Whitaker Av	renue		M M / D D / Y Y Y Y Y 1 1 1 1 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 2009111816423-1092
	Greenfield	WI	53228-2455	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer NML	Occupation Director	on - Di Benefits	7
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	291.00	
ſ	CUDTOTAL of Descripto This Descriptor 10	1		45.00
	SUBTOTAL of Receipts This Page (optional)			
- 1	TOTAL This Period (last page this line number	only)		

	EDULE A (FEC Form 3X) IZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 461 / 574 (check only one) X 11a
or for co	ormation copied from such Reports and ommercial purposes, other than using the ME OF COMMITTEE (In Full) & Northwestern Mutual Life Insura	ne name and ad	dress of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
. Step	Name (Last, First, Middle Initial) hen J. Strommen			Date of Receipt
Maili —— City	ing Address 7410 N Range Line F	Road State	Zip Code	0 7 3 1 2 0 0 9 Transaction ID: 20090804-789-10-0
-	ndale	WI	53209-2028	Amount of Each Receipt this Period
FEC	ID number of contributing ral political committee.	C		18.00
Nam NMI	ne of Employer	Occupation Sr Actua		
Rec	eipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 342.00	
. Step	Name (Last, First, Middle Initial) hen J. Strommen	2		Date of Receipt
Maii	ing Address 7410 N Range Line F	08 15 2009		
City		State	Zip Code	Transaction ID: 20090819-856-14-15
FEC	ndale ID number of contributing ral political committee.	C	53209-2028	Amount of Each Receipt this Period 18.00
Nam NMI	ne of Employer	Occupation Sr Actua		
Rec	eipt For: Primary General Other (specify) ▼	'	e Year-to-Date ▼ 342.00	
	Name (Last, First, Middle Initial) hen J. Strommen			Date of Receipt
Maili	ing Address 7410 N Range Line F	Road		0 8 3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	ndale	State WI	Zip Code 53209-2028	Transaction ID: 20090902-856-15-1
FEC	ID number of contributing ral political committee.	C	53209-2028	Amount of Each Receipt this Period 18.00
Nam NMI	ne of Employer	Occupation Sr Actua		
Rec	eipt For: Primary General Other (specify) ▼	 -	e Year-to-Date ▼ 342.00	
SUBT	OTAL of Receipts This Page (optional)			54.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 462 / 574 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	Statements may not be sold or used by any perse name and address of any political committee to nce Company Federal PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Stephen J. Strommen Mailing Address 7410 N Range Line R City Glendale FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53209-2028 C Occupation Sr Actuary Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Stephen J. Strommen Mailing Address 7410 N Range Line R City Glendale FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53209-2028 C Occupation Sr Actuary Aggregate Year-to-Date ▼ 342.00	Date of Receipt M M D D D 2 0 0 9
Full Name (Last, First, Middle Initial) Stephen J. Strommen Mailing Address 7410 N Range Line R City Glendale FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	Oad State Zip Code WI 53209-2028 C Occupation Sr Actuary Aggregate Year-to-Date ▼ 342.00	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional)		54.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 463 / 574 (check only one) X 11a
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Incurses	name and ad	Idress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insurant Full Name (Last, First, Middle Initial)	ce Company	y Federal PAC	
Α.	Stephen J. Strommen Mailing Address 7410 N Range Line Ro	oad		Date of Receipt
	City	State	Zip Code	1 0 3 1 2 0 0 9 Transaction ID: 20091105152628-777
	Glendale FEC ID number of contributing federal political committee.	C	53209-2028	Amount of Each Receipt this Period 18.00
	Name of Employer NML	Occupation Sr Actua		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 342.00	
В.	Full Name (Last, First, Middle Initial) Stephen J. Strommen Mailing Address 7410 N Range Line Ro	oad		Date of Receipt
	City	State	Zip Code	1 1 1 5 2 0 0 9 Transaction ID: 2009111816423-777
	Glendale FEC ID number of contributing federal political committee.	C	53209-2028	Amount of Each Receipt this Period 18.00
	Name of Employer NML	Occupation Sr Actua		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 342.00	
С.	Full Name (Last, First, Middle Initial) Daphne C Stroud	<u> </u>		Date of Receipt
	Mailing Address 150 Fernwood Drive			07 15 2009
	City East Greenwich	State RI	Zip Code 02818-1616	Transaction ID: 20090720-1240-13-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Southern NE Group LLC	Occupation Special		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 882.00	
	SUBTOTAL of Receipts This Page (optional)			78.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 464 / 574 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	name and address of any political committee to	n for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Daphne C Stroud Mailing Address 150 Fernwood Drive City	State Zip Code	Date of Receipt M M
East Greenwich FEC ID number of contributing federal political committee.	RI 02818-1616	Amount of Each Receipt this Period 42.00
Name of Employer Southern NE Group LLC Receipt For: Primary General Other (specify) ▼	Occupation Special Agent Aggregate Year-to-Date ▼ 882.00	
Full Name (Last, First, Middle Initial) Daphne C Stroud Mailing Address 150 Fernwood Drive		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City East Greenwich FEC ID number of contributing	State Zip Code RI 02818-1616	Transaction ID: 20090819-62-14-0 Amount of Each Receipt this Period
federal political committee. Name of Employer Southern NE Group LLC Receipt For: Primary General Other (specify) ▼	Occupation Special Agent Aggregate Year-to-Date 882.00	42.00
Full Name (Last, First, Middle Initial) Daphne C Stroud Mailing Address 150 Fernwood Drive		Date of Receipt
City East Greenwich FEC ID number of contributing federal political committee.	State Zip Code RI 02818-1616 C	0 8 3 1 2 0 0 9 Transaction ID: 20090902-62-14-46 Amount of Each Receipt this Period 42.00
Name of Employer Southern NE Group LLC Receipt For: Primary General Other (specify)	Occupation Special Agent Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		126.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate for each cate Detailed Sum	
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	name and address of any polit	used by any person for the purpose of soliciting contributions itical committee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Daphne C Stroud Mailing Address 150 Fernwood Drive City East Greenwich FEC ID number of contributing federal political committee. Name of Employer Southern NE Group LLC Receipt For: Primary General Other (specify)	State Zip Code RI 02818-161 C Occupation Special Agent Aggregate Year-to-Date	42.00
Full Name (Last, First, Middle Initial) Daphne C Stroud Mailing Address 150 Fernwood Drive City East Greenwich FEC ID number of contributing federal political committee. Name of Employer Southern NE Group LLC Receipt For: Primary General Other (specify)	State Zip Code RI 02818-161 C Occupation Special Agent Aggregate Year-to-Date	42.00
Full Name (Last, First, Middle Initial) Daphne C Stroud Mailing Address 150 Fernwood Drive City East Greenwich FEC ID number of contributing federal political committee. Name of Employer Southern NE Group LLC Receipt For: Primary General Other (specify)	State Zip Code RI 02818-161 C Occupation Special Agent Aggregate Year-to-Date	42.00
SUBTOTAL of Receipts This Page (optional) .		126.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 466 / 574 (check only one) X 11a
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) Daphne C Stroud	- Company	, , , , , , , , , , , , , , , , , , , ,	Date of Receipt
	Mailing Address 150 Fernwood Drive City	State	Zip Code	Transaction ID: 20091105152043-66
	East Greenwich FEC ID number of contributing federal political committee.	C	02818-1616	Amount of Each Receipt this Period 42.00
	Name of Employer Southern NE Group LLC Receipt For: Primary General Other (specify) ▼	Occupation Special Aggregate		1
В.	Full Name (Last, First, Middle Initial) Daphne C Stroud Mailing Address 150 Fernwood Drive			Date of Receipt
	City East Greenwich	State RI	Zip Code 02818-1616	Transaction ID: 20091118163132-66 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Southern NE Group LLC	Occupation Special A	Agent	
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 882.00	
C.	Full Name (Last, First, Middle Initial) Theodore H. Strupp			Date of Receipt
	Mailing Address 9411 Harding Bouleva City	rd State	Zip Code	09 30 2009
	<u>Wauwatosa</u>	WI	53226-1722	Transaction ID: 20091008104013-804 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer NML	Occupation Dir Com	m Serv	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 255.00	
	SUBTOTAL of Receipts This Page (optional)			99.00
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 467 / 574 (check only one) X 11a		
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma ne name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	/ Federal PAC			
Α.	Full Name (Last, First, Middle Initial) Theodore H. Strupp			Date of Receipt		
	Mailing Address 9411 Harding Boulev	Mailing Address 9411 Harding Boulevard				
	City Wauwatosa	State WI	Zip Code 53226-1722	Transaction ID: 20091015164625-803 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		15.00		
	Name of Employer NML	Occupation Dir Com				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 255.00			
В.	Full Name (Last, First, Middle Initial) Theodore H. Strupp Mailing Address 9411 Harding Boulev	Theodore H. Strupp				
			7:a Code	10 31 20001 2009		
	City Wauwatosa	State WI	Zip Code 53226-1722	Transaction ID: 20091105152628-803 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		15.00		
	Name of Employer NML	Occupation Dir Com				
	Receipt For:	Aggregate	e Year-to-Date			
	Primary General Other (specify) ▼		255.00			
C.	Full Name (Last, First, Middle Initial) Theodore H. Strupp			Date of Receipt		
	Mailing Address 9411 Harding Boulev	Mailing Address 9411 Harding Boulevard				
	City Wauwatosa	State WI	Zip Code 53226-1722	Transaction ID: 2009111816423-803		
	FEC ID number of contributing federal political committee.	C	55220-1722	Amount of Each Receipt this Period 15.00		
	Name of Employer NML	Occupation Dir Com				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 255.00			
	SUBTOTAL of Receipts This Page (optional)	1		45.00		
	TOTAL This Period (last page this line number	er only)				

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 468 / 574 (check only one) X 11a
_	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
2	Full Name (Last, First, Middle Initial)	ice Company	y rederal FAC	
Α.	Christopher P. Swain Mailing Address 10927 N Wyngate Tra	Date of Receipt 1 0 3 1 2 0 0 9		
	City Mequon	State WI	Zip Code 53092-5862	Transaction ID: 20091105152628-845 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		10.42
	Name of Employer NML	Occupation	on ng Director	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 218.82	
- В.	Full Name (Last, First, Middle Initial) Christopher P. Swain Mailing Address 10927 N Wyngate Tra	ail		Date of Receipt
	City	State	Zip Code	1 1 1 5 2 0 0 9 Transaction ID: 2009111816423-845
	Mequon FEC ID number of contributing federal political committee.	C	53092-5862	Amount of Each Receipt this Period 10.42
	Name of Employer NML	Occupation Managin	on ng Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 218.82	
- C.	Full Name (Last, First, Middle Initial) Rachel L. Taknint			Date of Receipt
	Mailing Address 4733 N Cumberland I	ВІ		07 15 2009
	City Whitefish Bay	State WI	Zip Code 53211-1140	Transaction ID: 20090720-851-13-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.00
	Name of Employer NML	Occupation VP Info	on Risk Mgmt	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 588.00	
	SUBTOTAL of Receipts This Page (optional)			48.84
Ī	TOTAL This Period (last page this line number	r only)	·	

	JLE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 469 / 574 (check only one) X 11a 11b 11c 12
		Statements man	 y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions o solicit contributions from such committee.
1 \	F COMMITTEE (In Full) thwestern Mutual Life Insurar	nce Company	Federal PAC	
Rachel L.				Date of Receipt
	ddress 4733 N Cumberland I		7. 0.4	07 31 2009
City Whitefis	h Bav	State WI	Zip Code 53211-1140	Transaction ID: 20090804-850-10-0 Amount of Each Receipt this Period
FEC ID n	umber of contributing litical committee.	C	002111110	28.00
Name of E NML	Employer	Occupatio VP Info F	n Risk Mgmt	
	or: nary General er (specify) ▼	- '	e Year-to-Date ▼ 588.00	
Full Name	e (Last, First, Middle Initial) Taknint			Date of Receipt
Mailing Ad	ddress 4733 N Cumberland I	BI		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: 20090819-917-14-15
Whitefis	•	WI	53211-1140	Amount of Each Receipt this Period
	umber of contributing litical committee.	C		28.00
Name of E NML	Employer	Occupatio VP Info F	n Risk Mgmt	
Receipt F		Aggregate	e Year-to-Date ▼	
Prin Oth	nary		588.00	
Full Name	e (Last, First, Middle Initial) Taknint			Date of Receipt
Mailing Ad	ddress 4733 N Cumberland I	BI		08 31 2009
City	h Dav	State	Zip Code	Transaction ID: 20090902-917-15-1
	n Bay umber of contributing litical committee.	C	53211-1140	Amount of Each Receipt this Period 28.00
Name of E		Occupatio	n Risk Mgmt	
Receipt F	or:	- '	e Year-to-Date	
	nary General er (specify) ▼		588.00]
	of Receipts This Page (optional)			84.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 470 / 574 (check only one) X 11a
7	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
_	Full Name (Last, First, Middle Initial)		y i ederal i AO	
Α.	Rachel L. Taknint Mailing Address 4733 N Cumberland E	31		Date of Receipt 0 9 1 5 2 0 0 9
	City Whitefish Bay	State WI	Zip Code 53211-1140	Transaction ID: 20090921-912-17-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.00
	Name of Employer NML	Occupation VP Info	on Risk Mgmt	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 588.00	
В.	Full Name (Last, First, Middle Initial) Rachel L. Taknint Mailing Address 4733 N Cumberland E	31		Date of Receipt
	City	State	Zip Code	0 9 3 0 2 0 0 9 Transaction ID: 20091008104013-839
	Whitefish Bay	WI	53211-1140	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.00
	Name of Employer NML	Occupation VP Info	on Risk Mgmt	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 588.00	
- C.	Full Name (Last, First, Middle Initial) Rachel L. Taknint			Date of Receipt
	Mailing Address 4733 N Cumberland E	31		10 / 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Whitefish Bay	State WI	Zip Code 53211-1140	Transaction ID: 20091015164625-838 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.00
	Name of Employer NML	Occupation VP Info	on Risk Mgmt	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 588.00	
	SUBTOTAL of Receipts This Page (optional) .			84.00
T	TOTAL This Period (last page this line number	r only)		

or for commercial purposes, other than using		
NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to	on for the purpose of soliciting contributions
The Northwestern Mutual Life Insur Full Name (Last, First, Middle Initial)	rance Company Federal PAC	
Rachel L. Taknint Mailing Address 4733 N Cumberlan	d Bl	Date of Receipt 1 0 3 1 2 0 0 9
City Whitefish Bay	State Zip Code WI 53211-1140	Transaction ID: 20091105152628-838 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer NML	Occupation VP Info Risk Mgmt	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 588.00	
Full Name (Last, First, Middle Initial) Rachel L. Taknint	1	Date of Receipt
Mailing Address 4733 N Cumberlan	d Bl	1 1 1 5 2 0 0 9
City	State Zip Code	Transaction ID: 2009111816423-838
Whitefish Bay	WI 53211-1140	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer NML	Occupation VP Info Risk Mgmt	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	588.00	
Full Name (Last, First, Middle Initial) Thomas Talajkowski	1	Date of Receipt
Mailing Address 1550 East Cumber	land	11 15 2009
City	State Zip Code	Transaction ID: 2009111816423-876
Whitefish Bay FEC ID number of contributing federal political committee.	WI 53211-1141	Amount of Each Receipt this Period 10.00
Name of Employer NML	Occupation Dir Product Support	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
SUBTOTAL of Receipts This Page (optional	il)	66.00

	ILE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 472 / 574 (check only one) X
Any information or for comme	on copied from such Reports and S rcial purposes, other than using the	Statements mage name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	COMMITTEE (In Full) Chwestern Mutual Life Insuran	ce Company	Federal PAC	
Full Name A. Joe P Teag	(Last, First, Middle Initial) gue			Date of Receipt
Mailing Ad	ldress 2613 N Dundee Street	t		07 15 2009
City Tampa		State FL	Zip Code 33629-7516	Transaction ID: 20090720-1192-13-1 Amount of Each Receipt this Period
FEC ID nu	umber of contributing litical committee.	C		70.00
Name of E Teague Fi	Employer ncl Group Inc	Occupatio Special A		
Receipt Fo		Aggregate	e Year-to-Date ▼ 1470.00	
B. Joe P Teag				Date of Receipt
Mailing Ad	Idress 2613 N Dundee Street	t		07 31 2009
City		State FL	Zip Code	Transaction ID: 20090804-1190-10-0
	umber of contributing litical committee.	C	33629-7516	Amount of Each Receipt this Period 70.00
Name of E Teague Fi	Employer ncl Group Inc	Occupation Special A		
Receipt Fo		Aggregate	e Year-to-Date ▼ 1470.00	
Full Name Joe P Teag	(Last, First, Middle Initial)			Date of Receipt
Mailing Ad	Idress 2613 N Dundee Street	t		0 8 1 5 2 0 0 9
City		State FL	Zip Code 33629-7516	Transaction ID: 20090819-15-14-0
	umber of contributing litical committee.	C	33629-7516	Amount of Each Receipt this Period 70.00
Name of E Teague Fi	Employer ncl Group Inc	Occupatio Special A		
Receipt For Prim Other		1 ' '	e Year-to-Date ▼ 1470.00	
SUBTOTAL	of Receipts This Page (optional)			210.00
	s Period (last page this line number		<u> </u>	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 473 / 574 (check only one) X
0	ny information copied from such Reports and a for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	ice Company	Federal PAC	
<u>∠</u> A.	Full Name (Last, First, Middle Initial) Joe P Teague			Date of Receipt
	Mailing Address 2613 N Dundee Stree	t		08 / 31 / 2009
	City <u>Tampa</u>	State FL	Zip Code 33629-7516	Transaction ID: 20090902-15-14-46 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		70.00
	Name of Employer Teague Fncl Group Inc	Occupation Special A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1470.00	
— В.	Full Name (Last, First, Middle Initial) Joe P Teague			Date of Receipt
	Mailing Address 2613 N Dundee Stree	t		09 / 15 / 2009
	City Tampa	State FL	Zip Code 33629-7516	Transaction ID: 20090921-15-16-16
	FEC ID number of contributing federal political committee.	C	33029-7310	Amount of Each Receipt this Period 70.00
	Name of Employer Teague Fncl Group Inc	Occupation Special A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1470.00	
_ C.	Full Name (Last, First, Middle Initial) Joe P Teague			Date of Receipt
	Mailing Address 2613 N Dundee Stree	t		09 30 7 2009
	City	State FL	Zip Code 33629-7516	Transaction ID: 20091008103448-15
	Tampa FEC ID number of contributing federal political committee.	C	33029-7310	Amount of Each Receipt this Period 70.00
	Name of Employer Teague Fncl Group Inc	Occupation Special A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1470.00	
Γ,	SUBTOTAL of Receipts This Page (optional) .			210.00
F	FOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 474 / 574 (check only one) X 11a 11b 11c 12
NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
The Northwestern Mutual Life Insu Full Name (Last, First, Middle Initial)	urance Company Federal PAC	Date of Descript
Joe P Teague Mailing Address 2613 N Dundee St	treet	Date of Receipt 10 15 2009
City <u>Tampa</u>	State Zip Code FL 33629-7516	Transaction ID: 2009102293957-15 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	70.00
Name of Employer Teague Fncl Group Inc	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1470.00	
Full Name (Last, First, Middle Initial) Joe P Teague	 	Date of Receipt
Mailing Address 2613 N Dundee St		10 31 2009
City Tampa	State Zip Code FL 33629-7516	Transaction ID: 20091105152043-15
FEC ID number of contributing federal political committee.	C 33023-7310	Amount of Each Receipt this Period 70.00
Name of Employer Teague Fncl Group Inc	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1470.00	
Full Name (Last, First, Middle Initial) Joe P Teague	'	Date of Receipt
Mailing Address 2613 N Dundee St	treet	1 1 1 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Tampa</u>	State Zip Code FL 33629-7516	Transaction ID: 20091118163132-15 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	70.00
Name of Employer Teague Fncl Group Inc	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1470.00	
	nal)	210.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 475 / 574 (check only one) X 11a
	Any information copied from such Reports and sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ice Company	Federal PAC	
Δ.	Full Name (Last, First, Middle Initial) Michael F Tews			Date of Receipt
	Mailing Address 609 S 249th Circle			07 15 2009
	City Waterloo	State NE	Zip Code 68069-4432	Transaction ID: 20090720-1211-13-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		42.00
	Name of Employer Tews Fncl Group Inc	Occupatio Special A		
	Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	e Year-to-Date ▼ 882.00	
- В.	Full Name (Last, First, Middle Initial) Michael F Tews			Date of Receipt
	Mailing Address 609 S 249th Circle			07 31 2009
	City	State	Zip Code	Transaction ID: 20090804-1208-10-0
	Waterloo FEC ID number of contributing federal political committee.	NE C	68069-4432	Amount of Each Receipt this Period 42.00
	Name of Employer Tews Fncl Group Inc	Occupation Special A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 882.00	
с. С.	Full Name (Last, First, Middle Initial) Michael F Tews			Date of Receipt
	Mailing Address 609 S 249th Circle			08 15 2009
	City Waterloo	State NE	Zip Code 68069-4432	Transaction ID: 20090819-33-14-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00003-4432	42.00
	Name of Employer Tews Fncl Group Inc	Occupation Special A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 882.00	
	SUBTOTAL of Receipts This Page (optional) .			126.00
f	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 476 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	Statements may not be sold or used by any person ename and address of any political committee to note Company Federal PAC	
Full Name (Last, First, Middle Initial) Michael F Tews Mailing Address 609 S 249th Circle		Date of Receipt
City Waterloo FEC ID number of contributing	State Zip Code NE 68069-4432	0 8 3 1 2 0 0 9 Transaction ID: 20090902-33-14-46 Amount of Each Receipt this Period
Name of Employer Tews Fncl Group Inc Receipt For: Primary General	Occupation Special Agent Aggregate Year-to-Date ▼	42.00
Full Name (Last, First, Middle Initial) Michael F Tews Mailing Address 609 S 249th Circle		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Waterloo FEC ID number of contributing federal political committee.	State Zip Code NE 68069-4432	Transaction ID: 20090921-33-16-16 Amount of Each Receipt this Period 42.00
Name of Employer Tews Fncl Group Inc Receipt For: Primary General Other (specify) ▼	Occupation Special Agent Aggregate Year-to-Date 882.00	
Full Name (Last, First, Middle Initial) Michael F Tews Mailing Address 609 S 249th Circle		Date of Receipt 0 9 3 0 2 0 0 9
City Waterloo FEC ID number of contributing federal political committee.	State Zip Code NE 68069-4432 C	Transaction ID: 20091008103448-33 Amount of Each Receipt this Period 42.00
Name of Employer Tews Fncl Group Inc Receipt For: Primary General	Occupation Special Agent Aggregate Year-to-Date ▼	
Other (specify)	882.00	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 477 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	nd Statements may not be sold or used by any persong the name and address of any political committee to	
Full Name (Last, First, Middle Initial) Michael F Tews Mailing Address 609 S 249th Circle		Date of Receipt
City Waterloo FEC ID number of contributing	State Zip Code NE 68069-4432	Transaction ID: 2009102293957-33 Amount of Each Receipt this Period
federal political committee. Name of Employer Tews Fncl Group Inc	Occupation Special Agent	42.00
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 882.00	
Full Name (Last, First, Middle Initial) Michael F Tews Mailing Address 609 S 249th Circle		Date of Receipt 1 0 3 1 2 0 0 9
City Waterloo	State Zip Code NE 68069-4432	Transaction ID: 20091105152043-33
FEC ID number of contributing federal political committee.	C 65009-4432	Amount of Each Receipt this Period 42.00
Name of Employer Tews Fncl Group Inc	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 882.00	
Full Name (Last, First, Middle Initial) Michael F Tews Mailing Address 609 S 249th Circle		Date of Receipt
City	State Zip Code	Transaction ID: 20091118163132-33
Waterloo FEC ID number of contributing federal political committee.	NE 68069-4432	Amount of Each Receipt this Period 42.00
Name of Employer Tews Fncl Group Inc	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 882.00	
SUBTOTAL of Receipts This Page (option	al)	126.00

I	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS Any information copied from such Reports and S	Statements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 478 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
7	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and ad	dress of any political committee t	o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Scott P Theodore			Date of Receipt
	Mailing Address 12505 Ventana Mesa	Circle		07 15 Y Y Y Y Y Y Y
	City Castle Rock	State CO	Zip Code 80108-9148	Transaction ID: 20090720-1220-13-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.00
	Name of Employer NML	Occupation Special		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4368.00	
В.	Full Name (Last, First, Middle Initial) Scott P Theodore Mailing Address 12505 Ventana Mesa	Circle		Date of Receipt 0 7 3 1 2 0 0 9
	City	State	Zip Code	Transaction ID: 20090804-1217-10-0
	Castle Rock	CO	80108-9148	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.00
	Name of Employer NML	Occupation Special A	Agent	
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 4368.00	
С. С.	Full Name (Last, First, Middle Initial) Scott P Theodore	<u> </u>		Date of Receipt
	Mailing Address 12505 Ventana Mesa	Circle		08 15 2009
	City	State	Zip Code	Transaction ID: 20090819-42-14-0
	Castle Rock FEC ID number of contributing federal political committee.	C	80108-9148	Amount of Each Receipt this Period 208.00
	Name of Employer NML	Occupation Special		
	Receipt For: Primary General Other (specify) ▼	, ' ' 	e Year-to-Date ▼ 4368.00	
	SUBTOTAL of Receipts This Page (optional) .	1		624.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 479 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not be sold or used by any personant the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	ance Company Federal PAC	
Full Name (Last, First, Middle Initial) Scott P Theodore		Date of Receipt
Mailing Address 12505 Ventana Mes	sa Circle	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20090902-42-14-46
Castle Rock	CO 80108-9148	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	208.00
Name of Employer NML	Occupation Special Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	4368.00]
Full Name (Last, First, Middle Initial) Scott P Theodore		Date of Receipt
Mailing Address 12505 Ventana Mes	sa Circle	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20090921-43-16-16
Castle Rock	CO 80108-9148	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	208.00
Name of Employer NML	Occupation Special Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	4368.00	
Full Name (Last, First, Middle Initial) Scott P Theodore		Date of Receipt
Mailing Address 12505 Ventana Mes	sa Circle	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20091008103448-43
Castle Rock	CO 80108-9148	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	208.00
Name of Employer NML	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4368.00	
SUBTOTAL of Receipts This Page (optiona	l)	624.00
	ber only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 480 / 574 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	Statements may not be sold or used by any pers ne name and address of any political committee to nce Company Federal PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Scott P Theodore Mailing Address 12505 Ventana Mesa City Castle Rock FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code CO 80108-9148 C Occupation Special Agent Aggregate Year-to-Date 4368.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Scott P Theodore Mailing Address 12505 Ventana Mesa City Castle Rock FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼	C Circle State Zip Code CO 80108-9148 C Occupation Special Agent Aggregate Year-to-Date ▼ 4368.00	Date of Receipt 10 31 2009 Transaction ID: 20091105152043-43 Amount of Each Receipt this Period 208.00
Full Name (Last, First, Middle Initial) Scott P Theodore Mailing Address 12505 Ventana Mesa City Castle Rock FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: □ Primary □ General □ Other (specify) ▼	C Circle State Zip Code CO 80108-9148 C C Occupation Special Agent Aggregate Year-to-Date ▼ 4368.00	Date of Receipt M M D D 2009 Transaction ID: 20091118163132-43 Amount of Each Receipt this Period 208.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	624.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 481 / 574 (check only one) X
,	ny information copied from such Reports and r for commercial purposes, other than using t	Statements ma	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	nce Company	/ Federal PAC	
۸.	Full Name (Last, First, Middle Initial) Douglas D. Timmer			Date of Receipt
	Mailing Address 633 W McIntosh Lar	07 15 2009		
	City <u>Mequon</u>	State WI	Zip Code 53092-6022	Transaction ID: 20090720-975-13-0
	FEC ID number of contributing federal political committee.	C	33092-0022	Amount of Each Receipt this Period 17.00
	Name of Employer NML	Occupation Asst Gc	on & Asst Sec	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 357.00	
	Full Name (Last, First, Middle Initial) Douglas D. Timmer	-		Date of Receipt
	Mailing Address 633 W McIntosh Lar		07 31 YYYY 2009	
	City	State	Zip Code	Transaction ID: 20090804-973-10-0
	Mequon	WI	53092-6022	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		17.00
	Name of Employer NML	Occupation Asst Gc	on & Asst Sec	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		357.00	
. –	Full Name (Last, First, Middle Initial) Douglas D. Timmer			Date of Receipt
	Mailing Address 633 W McIntosh Lar	e		08 15 Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20090819-1040-14-15
	Mequon FEC ID number of contributing federal political committee.	C	53092-6022	Amount of Each Receipt this Period 17.00
	Name of Employer NML	Occupation Asst Gc	on & Asst Sec	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 357.00	
	SUBTOTAL of Receipts This Page (optional)	1		51.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 482 / 574 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	Statements may not be sold or used by any personename and address of any political committee to note Company Federal PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Douglas D. Timmer Mailing Address 633 W McIntosh Lane City Mequon FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53092-6022 C Occupation Asst Gc & Asst Sec Aggregate Year-to-Date 357.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Douglas D. Timmer Mailing Address 633 W McIntosh Land City Mequon FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)		Date of Receipt M M D D 2 0 0 9
Full Name (Last, First, Middle Initial) Douglas D. Timmer Mailing Address 633 W McIntosh Land City Mequon FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53092-6022 C Occupation Asst Gc & Asst Sec Aggregate Year-to-Date 357.00	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)		51.00

•	TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A.	Full Name (Last, First, Middle Initial) Douglas D. Timmer Mailing Address 633 W McIntosh Lane		Date of Receipt
	City Mequon FEC ID number of contributing	State Zip Code WI 53092-6022	Transaction ID: 20091015164625-1008 Amount of Each Receipt this Period 17.00
	Name of Employer NML Receipt For: Primary General	Occupation Asst Gc & Asst Sec Aggregate Year-to-Date ▼ 357.00	1
– B.	Other (specify) ▼ Full Name (Last, First, Middle Initial) Douglas D. Timmer Mailing Address 633 W McIntosh Lane		Date of Receipt 10 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Mequon FEC ID number of contributing federal political committee.	State Zip Code WI 53092-6022	Transaction ID: 20091105152628-1008 Amount of Each Receipt this Period 17.00
	Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation Asst Gc & Asst Sec Aggregate Year-to-Date 357.00	
С.	Full Name (Last, First, Middle Initial) Douglas D. Timmer Mailing Address 633 W McIntosh Lane		Date of Receipt 1 1 1 1 5 2 0 0 9
	City Mequon FEC ID number of contributing federal political committee.	State Zip Code WI 53092-6022	Transaction ID: 2009111816423-1007 Amount of Each Receipt this Period 17.00
	Name of Employer NML Receipt For: Primary General Other (specify)	Occupation Asst Gc & Asst Sec Aggregate Year-to-Date 357.00	
	SUBTOTAL of Receipts This Page (optional)		51.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 484 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Ai	ny information copied from such Reports and for commercial purposes, other than using the	Statements ma ne name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	nce Company	Federal PAC	
۸.	Full Name (Last, First, Middle Initial) Alessandro J Tronco			Date of Receipt
	Mailing Address 5 N Point Drive	Ctata	7:n Code	11 15 2009
	City Cohoes	State NY	Zip Code 12047-3823	Transaction ID: 20091118163132-68 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Self-Employed	Occupation General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 210.00	
. —	Full Name (Last, First, Middle Initial) Chris G. Trost			Date of Receipt
	Mailing Address 1218 E Olive Street			08 31 YYYY 2009
	City	State	Zip Code	Transaction ID: 20090902-697-15-1
	Shorewood	WI	53211-1825	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		18.00
	Name of Employer NML	Occupation Sr Actua		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	306.00	
	Full Name (Last, First, Middle Initial) Chris G. Trost			Date of Receipt
	Mailing Address 1218 E Olive Street			09 15 2009
	City	State	Zip Code	Transaction ID: 20090921-693-17-1
	Shorewood FEC ID number of contributing federal political committee.	C	53211-1825	Amount of Each Receipt this Period 18.00
	Name of Employer NML	Occupation Sr Actua		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 306.00	
	UBTOTAL of Receipts This Page (optional)			78.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 485 / 574 (check only one) X
7	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and addr	not be sold or used by any persess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Ž	The Northwestern Mutual Life Insurar	nce Company	Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Chris G. Trost Mailing Address 1218 E Olive Street			Date of Receipt
	City	State	Zip Code	0 9 3 0 2 0 0 9 Transaction ID: 20091008104013-619
	Shorewood	WI	53211-1825	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		18.00
	Name of Employer NML	Occupation Sr Actuary		
	Receipt For: Primary General Other (specify) ▼	Aggregate \	Year-to-Date ▼ 306.00	
_ 3.	Full Name (Last, First, Middle Initial) Chris G. Trost			Date of Receipt
	Mailing Address 1218 E Olive Street			10 15 2009
	City	State	Zip Code	Transaction ID: 20091015164625-618
	Shorewood	WI	53211-1825	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		18.00
	Name of Employer NML	Occupation Sr Actuary		
	Receipt For:	Aggregate `	Year-to-Date ▼	_
	Primary General Other (specify) ▼		306.00	
-).	Full Name (Last, First, Middle Initial) Chris G. Trost	1		Date of Receipt
	Mailing Address 1218 E Olive Street			10 31 7 2009
	City Shorewood	State WI	Zip Code	Transaction ID: 20091105152628-618
	FEC ID number of contributing federal political committee.	C	53211-1825	Amount of Each Receipt this Period 18.00
	Name of Employer NML	Occupation Sr Actuary		
	Receipt For: Primary General Other (specify) ▼	Aggregate \	Year-to-Date ▼ 306.00	
	SUBTOTAL of Receipts This Page (optional)	•		54.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 486 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	ly not be sold or used by any pers dress of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	y Federal PAC	
∠ A .	Full Name (Last, First, Middle Initial) Chris G. Trost			Date of Receipt
	Mailing Address 1218 E Olive Street			11 / 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Shorewood	State WI	Zip Code 53211-1825	Transaction ID: 2009111816423-618 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33211 1023	18.00
	Name of Employer NML	Occupatio Sr Actua		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 306.00	
– В.	Full Name (Last, First, Middle Initial) Leo C Tucker			Date of Receipt
	Mailing Address 605 Potomac River R	oad		07 15 2009
	City Mc Lean	State VA	Zip Code	Transaction ID: 20090720-1234-13-1
	FEC ID number of contributing federal political committee.	C	22102-1402	Amount of Each Receipt this Period 75.00
	Name of Employer Self-Employed	Occupation General	on Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1575.00	
_ С.	Full Name (Last, First, Middle Initial) Leo C Tucker			Date of Receipt
	Mailing Address 605 Potomac River R	oad		07 31 YYYYY 2009
	City	State	Zip Code	Transaction ID: 20090804-1231-10-0
	Mc Lean FEC ID number of contributing federal political committee.	C	22102-1402	Amount of Each Receipt this Period 75.00
	Name of Employer Self-Employed	Occupatio General	on Insurance Agent	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1575.00	
	SUBTOTAL of Receipts This Page (optional)			168.00
F	TOTAL This Period (last page this line numbe			

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 487 / 574 (check only one) X
,	Any information copied from such Reports and or for commercial purposes, other than using the	Statements mane name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	nce Company	/ Federal PAC	
∠ A.	Full Name (Last, First, Middle Initial) Leo C Tucker			Date of Receipt
	Mailing Address 605 Potomac River F	Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20090819-56-14-0
	Mc Lean	VA	22102-1402	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer Self-Employed	Occupation General	n Insurance Agent	
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼		1575.00	
_ В.	Full Name (Last, First, Middle Initial) Leo C Tucker			Date of Receipt
	Mailing Address 605 Potomac River F	08 / 31 / 2009		
	City	State	Zip Code	Transaction ID: 20090902-56-14-46
	Mc Lean	VA	22102-1402	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer Self-Employed	Occupation General	n Insurance Agent	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		1575.00	
С. С.	Full Name (Last, First, Middle Initial) Leo C Tucker			Date of Receipt
	Mailing Address 605 Potomac River F	Road		0 9 1 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 20090921-59-16-16
	Mc Lean	VA	22102-1402	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer Self-Employed	Occupation General	n Insurance Agent	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼ 1575.00	7
_	Other (specify) ▼	0 0	1373.00	
	SUBTOTAL of Receipts This Page (optional)			225.00
	TOTAL This Period (last page this line number	er only)		

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 488 / 574 (check only one) X
\ \	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may he name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insura	nce Company	Federal PAC	
۱.	Full Name (Last, First, Middle Initial) Leo C Tucker			Date of Receipt
	Mailing Address 605 Potomac River F		7: 0 !	09 30 2009
	City Mc Lean	State VA	Zip Code 22102-1402	Transaction ID: 20091008103448-59
	FEC ID number of contributing federal political committee.	C	22102-1402	Amount of Each Receipt this Period 75.00
	Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1575.00	
_	Full Name (Last, First, Middle Initial) Leo C Tucker			Date of Receipt
	Mailing Address 605 Potomac River F	10 15 2009		
	City	State	Zip Code	Transaction ID: 2009102293957-59
	Mc Lean FEC ID number of contributing federal political committee.	C	22102-1402	Amount of Each Receipt this Period 75.00
	Name of Employer Self-Employed	Occupatio		
			Insurance Agent	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1575.00	
	Full Name (Last, First, Middle Initial) Leo C Tucker			Date of Receipt
	Mailing Address 605 Potomac River F	Road		10 31 7 9 9
	City <u>Mc Lean</u>	State VA	Zip Code 22102-1402	Transaction ID: 20091105152043-59 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1575.00	
	SUBTOTAL of Receipts This Page (optional)	l		225.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 489 / 574 (check only one) X
,	ny information copied from such Reports and r for commercial purposes, other than using t	Statements ma he name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	ince Company	/ Federal PAC	
۸.	Full Name (Last, First, Middle Initial) Leo C Tucker			Date of Receipt
	Mailing Address 605 Potomac River I	11 1 1 5 2009		
	City Mc Lean	State VA	Zip Code 22102-1402	Transaction ID: 20091118163132-59 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1575.00	
_	Full Name (Last, First, Middle Initial) Bruce K. Twomey	I		Date of Receipt
	Mailing Address 1035B Oakwood Lar	09 15 YYYY 2009		
	City	State	Zip Code	Transaction ID: 20090921-604-17-1
	Brookfield	WI	53045-2828	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		11.00
	Name of Employer NML	Occupation Dir Tech		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	255.00	
_	Full Name (Last, First, Middle Initial) Bruce K. Twomey	1		Date of Receipt
	Mailing Address 1035B Oakwood Lar	ne		09 30 2009
	City	State	Zip Code	Transaction ID: 20091008104013-530
	Brookfield FEC ID number of contributing federal political committee.	C	53045-2828	Amount of Each Receipt this Period 11.00
	Name of Employer NML	Occupatio Dir Tech		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 255.00	
Г	SUBTOTAL of Receipts This Page (optional)			97.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 490 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions oscilicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	ce Company	Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Bruce K. Twomey			Date of Receipt
	Mailing Address 1035B Oakwood Lane			10 15 2009
	City Prophried	State WI	Zip Code	Transaction ID: 20091015164625-529
	Brookfield FEC ID number of contributing federal political committee.	C	53045-2828	Amount of Each Receipt this Period 11.00
	Name of Employer NML	Occupatio Dir Tech		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 255.00]
В.	Full Name (Last, First, Middle Initial) Bruce K. Twomey			Date of Receipt
	Mailing Address 1035B Oakwood Lane			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20091105152628-529
	Brookfield	WI	53045-2828	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		11.00
	Name of Employer NML	Occupatio Dir Tech		
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify)		255.00	
C.	Full Name (Last, First, Middle Initial) Bruce K. Twomey			Date of Receipt
	Mailing Address 1035B Oakwood Lane			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 2009111816423-530
	Brookfield	WI	53045-2828	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		11.00
	Name of Employer NML	Occupatio Dir Tech		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		255.00	
	SUBTOTAL of Receipts This Page (optional)	1		33.00
	TOTAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 491 / 574 (check only one) X
4	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ice Company	Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Donald G. Tyler			Date of Receipt
	Mailing Address 4480 N Maryland			07 15 2009
	City Shorewood	State WI	Zip Code 53211-1651	Transaction ID: 20090720-1095-13-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	302111031	30.00
	Name of Employer NML	Occupatio VP lps P	n rod & Sales	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1110.00	
— В.	Full Name (Last, First, Middle Initial) Donald G. Tyler			Date of Receipt
	Mailing Address 4480 N Maryland			07 31 2009
	City	State WI	Zip Code	Transaction ID: 20090804-1093-10-0
	Shorewood FEC ID number of contributing federal political committee.	C	53211-1651	Amount of Each Receipt this Period 30.00
	Name of Employer NML	Occupatio VP lps P	n rod & Sales	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1110.00	
_ C.	Full Name (Last, First, Middle Initial) Donald G. Tyler			Date of Receipt
	Mailing Address 4480 N Maryland			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Shorewood	State WI	Zip Code	Transaction ID: 20090819-1159-14-15
	FEC ID number of contributing federal political committee.	C	53211-1651	Amount of Each Receipt this Period 30.00
	Name of Employer NML	Occupatio VP lps P	n rod & Sales	
	Receipt For: Primary General Other (specify) ▼	, ' 	e Year-to-Date ▼ 1110.00	
	SUBTOTAL of Receipts This Page (optional) .	1		90.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 492 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	d Statements may not be sold or used by any persite name and address of any political committee that the company Federal PAC	son for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Donald G. Tyler Mailing Address 4480 N Maryland		Date of Receipt 0 8 3 1 2 0 0 9
City Shorewood FEC ID number of contributing	State Zip Code WI 53211-1651	Transaction ID: 20090902-1159-15-1 Amount of Each Receipt this Period 30.00
Receipt For: Primary Other (specify)	Occupation VP Ips Prod & Sales Aggregate Year-to-Date ▼ 1110.00	
Full Name (Last, First, Middle Initial) Donald G. Tyler Mailing Address 4480 N Maryland		Date of Receipt 0 9 1 5 2 0 0 9
City Shorewood FEC ID number of contributing federal political committee.	State Zip Code WI 53211-1651 C	Transaction ID: 20090921-1149-17-1 Amount of Each Receipt this Period 30.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation VP Ips Prod & Sales Aggregate Year-to-Date ▼ 1110.00	
Full Name (Last, First, Middle Initial) Donald G. Tyler Mailing Address 4480 N Maryland		Date of Receipt
City Shorewood FEC ID number of contributing federal political committee.	State Zip Code WI 53211-1651 C	Transaction ID: 20091008104013-107 Amount of Each Receipt this Period 30.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation VP Ips Prod & Sales Aggregate Year-to-Date ▼ 1110.00	
SUBTOTAL of Receipts This Page (optional)	90.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 493 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and sor for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Donald G. Tyler			Date of Receipt
	Mailing Address 4480 N Maryland			10 15 2009
	City Shorewood	State WI	Zip Code 53211-1651	Transaction ID: 20091015164625-1074 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		30.00
	Name of Employer NML	Occupation VP lps P	n rod & Sales	
	Receipt For: Primary General Other (specify) ▼	- 	Year-to-Date ▼ 1110.00	
ь. В.	Full Name (Last, First, Middle Initial) Donald G. Tyler	_		Date of Receipt
	Mailing Address 4480 N Maryland			10 31 2009
	City	State	Zip Code	Transaction ID: 20091105152628-1074
	Shorewood	WI	53211-1651	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer NML	Occupation VP Ips P	n rod & Sales	
	Receipt For:	_ ' 	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1110.00	
С.	Full Name (Last, First, Middle Initial) Donald G. Tyler			Date of Receipt
	Mailing Address 4480 N Maryland			1 1 1 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 2009111816423-1073
	Shorewood FEC ID number of contributing federal political committee.	C	53211-1651	Amount of Each Receipt this Period 30.00
	Name of Employer NML	Occupation VP Ips P	n rod & Sales	
	Receipt For:	_ ' ` 	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1110.00]
	SUBTOTAL of Receipts This Page (optional) .			90.00
\mid			<u> </u>	
	TOTAL This Period (last page this line number	ı orliy)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 494 / 574 (check only one) X 11a
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura			
Α.	Full Name (Last, First, Middle Initial) Martha M. Valerio			Date of Receipt
	Mailing Address 6048 N Lydell City	State	Zip Code	0 7 1 5 2 0 0 9 Transaction ID: A052BDE595A21420C1E
	Whitefish Bay	WI	53217-4522	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.00
	Name of Employer NML	Occupation VP & Ch	on lief Info Security Ofcr	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 396.00	
В.	Full Name (Last, First, Middle Initial) Martha M. Valerio	-		Date of Receipt
	Mailing Address 6048 N Lydell			07 31 7 2009
	City	State	Zip Code	Transaction ID: 329273CBA7AC7E9F992
	Whitefish Bay FEC ID number of contributing federal political committee.	C	53217-4522	Amount of Each Receipt this Period 12.00
	Name of Employer NML	Occupation VP & Ch	on ief Info Security Ofcr	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 396.00	
С.	Full Name (Last, First, Middle Initial) Martha M. Valerio			Date of Receipt
	Mailing Address 6048 N Lydell			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Whitefish Bay	State WI	Zip Code 53217-4522	Transaction ID: B25C9342C062B04495D Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.00
	Name of Employer NML	Occupation VP & Ch	on lief Info Security Ofcr	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 396.00	
	SUBTOTAL of Receipts This Page (optional)			36.00
Ì	TOTAL This Period (last page this line number	er only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 495 / 574 (check only one) X
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Martha M. Valerio Mailing Address 6048 N Lydell City Whitefish Bay FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)		Zip Code 53217-4522 n ief Info Security Ofcr e Year-to-Date ▼ 396.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
В.	Full Name (Last, First, Middle Initial) Martha M. Valerio Mailing Address 6048 N Lydell City Whitefish Bay FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	_ '	Zip Code 53217-4522 n ief Info Security Ofcr e Year-to-Date ▼ 396.00	Date of Receipt M M M / D D / 2009 Transaction ID: F1C9612F7FA7CABE80 Amount of Each Receipt this Period 12.00
_ C.	Full Name (Last, First, Middle Initial) Martha M. Valerio Mailing Address 6048 N Lydell City Whitefish Bay FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)		Zip Code 53217-4522 n ief Info Security Ofcr e Year-to-Date ▼ 396.00	Date of Receipt M M M / D D D 2009 Transaction ID: D29D23E2226A83CCDA Amount of Each Receipt this Period 12.00
	SUBTOTAL of Receipts This Page (optional)			36.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 496 / 574 (check only one) X 11a
	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar			on for the purpose of soliciting contributions o solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) Martha M. Valerio Mailing Address 6048 N LydelI City Whitefish Bay FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)		Zip Code 53217-4522 n ief Info Security Ofcr Year-to-Date ▼ 396.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
В.	Full Name (Last, First, Middle Initial) Martha M. Valerio Mailing Address 6048 N Lydell City Whitefish Bay FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)		Zip Code 53217-4522 n ief Info Security Ofcr e Year-to-Date ▼ 396.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
c.	Full Name (Last, First, Middle Initial) Martha M. Valerio Mailing Address 6048 N Lydell City Whitefish Bay FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	, '	Zip Code 53217-4522 n ief Info Security Ofcr Year-to-Date ▼ 396.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	SUBTOTAL of Receipts This Page (optional) . TOTAL This Period (last page this line number			36.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 497 / 574 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	the name and add	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Patricia L. Van Kampen Mailing Address 4520 N Lake Drive			Date of Receipt 0 7 1 5 2 0 0 9
City Whitefish Bay FEC ID number of contributing federal political committee.	State WI	Zip Code 53211-1252	Transaction ID: 20090720-639-13-0 Amount of Each Receipt this Period 62.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼		n c Equities e Year-to-Date ▼ 1350.00	
Full Name (Last, First, Middle Initial) Patricia L. Van Kampen Mailing Address 4520 N Lake Drive			Date of Receipt 0 7 3 1 2 0 0 9
City Whitefish Bay FEC ID number of contributing federal political committee.	State WI	Zip Code 53211-1252	Transaction ID: 20090804-639-10-0 Amount of Each Receipt this Period 62.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼		n c Equities e Year-to-Date ▼ 1350.00]
Full Name (Last, First, Middle Initial) Patricia L. Van Kampen Mailing Address 4520 N Lake Drive			Date of Receipt
City Whitefish Bay FEC ID number of contributing federal political committee.	State WI	Zip Code 53211-1252	Transaction ID: 20090819-706-14-15 Amount of Each Receipt this Period 62.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	'	n c Equities e Year-to-Date ▼ 1350.00	
SUBTOTAL of Receipts This Page (optional))		186.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 498 / 5 / 4 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	ance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Patricia L. Van Kampen			Date of Receipt
Mailing Address 4520 N Lake Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Whitefish Bay	State WI	Zip Code 53211-1252	Transaction ID: 20090902-706-15-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		62.00
Name of Employer NML	Occupatio VP Publi	n c Equities	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1350.00	
Full Name (Last, First, Middle Initial) Patricia L. Van Kampen			Date of Receipt
Mailing Address 4520 N Lake Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Whitefish Bay	State WI	Zip Code 53211-1252	Transaction ID: 20090921-702-17-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		62.00
Name of Employer NML	Occupatio VP Publi	n c Equities	
Receipt For: Primary General Other (specify) ▼	<u> </u>	e Year-to-Date ▼ 1350.00	
Full Name (Last, First, Middle Initial) Patricia L. Van Kampen			Date of Receipt
Mailing Address 4520 N Lake Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Whitefish Bay	State WI	Zip Code 53211-1252	Transaction ID: 20091008104013-628 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	002111202	62.00
Name of Employer NML	Occupatio VP Publi	n c Equities	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1350.00	
SUBTOTAL of Receipts This Page (optional	<u> </u>		186.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 499 / 574 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur-	the name and add	ress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Patricia L. Van Kampen Mailing Address 4520 N Lake Drive City	State	Zip Code	Date of Receipt 10 15 20091015164625-627
Whitefish Bay FEC ID number of contributing federal political committee.	C	53211-1252	Amount of Each Receipt this Period 62.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation VP Public Aggregate]
Full Name (Last, First, Middle Initial) Patricia L. Van Kampen Mailing Address 4520 N Lake Drive	,		Date of Receipt 1 0 3 1 2 0 0 9
City Whitefish Bay	State WI	Zip Code 53211-1252	Transaction ID: 20091105152628-627 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	C		62.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	VP Public]
Full Name (Last, First, Middle Initial) Patricia L. Van Kampen Mailing Address 4520 N Lake Drive			Date of Receipt
City Whitefish Bay	State WI	Zip Code 53211-1252	1 1 1 5 2 0 0 9 Transaction ID: 2009111816423-627
FEC ID number of contributing federal political committee.	C	55211-1252	Amount of Each Receipt this Period 62.00
Name of Employer NML	Occupation VP Public	Equities	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1350.00	
SUBTOTAL of Receipts This Page (optional			186.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	(X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 500 / 574 (check only one)		
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Inst	<u> </u>	•			
Full Name (Last, First, Middle Initial) Janine L. Wagner			Date of Receipt		
City Milwaukee	State WI	Zip Code 53202-3022	Transaction ID: 20091015164625-826 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		12.00		
Name of Employer NML	Occupation Director I		7		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 228.00			
Full Name (Last, First, Middle Initial) Janine L. Wagner	I		Date of Receipt		
Mailing Address 1300 N Prospect A	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City Milwaukee	State WI	Zip Code 53202-3022	Transaction ID: 20091105152628-82 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		12.00		
Name of Employer NML	Occupation Director I				
Receipt For: Primary General Other (specify)	+	Year-to-Date ▼ 228.00			
Full Name (Last, First, Middle Initial) Janine L. Wagner			Date of Receipt		
Mailing Address 1300 N Prospect A	Avenue		M M / D D / Y Y Y Y Y 1 Y 1 1 1 5 2 0 0 9		
City Milwaukee	State WI	Zip Code 53202-3022	Transaction ID: 2009111816423-826 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	00202 0022	12.00		
Name of Employer NML	Occupation Director I				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 228.00			
SUBTOTAL of Receipts This Page (option	nal)		36.00		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 501 / 574 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Robert J Waltos, Jr. Mailing Address 7 Castaways N City Newport Beach FEC ID number of contributing federal political committee. Name of Employer RJ Waltos Ins Ser Inc Receipt For:	State CA C Occupation Special A	Agent	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1700.00	
Robert J Waltos, Jr. Mailing Address 7 Castaways N City Newport Beach FEC ID number of contributing federal political committee. Name of Employer RJ Waltos Ins Ser Inc Receipt For:	State CA C Occupatio Special A Aggregate		Date of Receipt M M 7 3 1 2 0 0 9
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Robert J Waltos, Jr. Mailing Address 7 Castaways N	0 0	1700.00	Date of Receipt 0 8 1 5 2 0 0 9
City Newport Beach FEC ID number of contributing federal political committee. Name of Employer RJ Waltos Ins Ser Inc	State CA C Occupation Special A		Transaction ID: 20090819-26-14-0 Amount of Each Receipt this Period 75.00
Receipt For: Primary General Other (specify)	- ' ' 	e Year-to-Date ▼ 1700.00	
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		•	225.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 502 / 574 (check only one) X
4	Any information copied from such Reports and or for commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	nce Company	Federal PAC	
A.	Full Name (Last, First, Middle Initial) Robert J Waltos, Jr.			Date of Receipt
	Mailing Address 7 Castaways N			08 / 31 / 2009
	City Newport Beach	State CA	Zip Code 92660-8403	Transaction ID: 20090902-26-14-46
	FEC ID number of contributing federal political committee.	C	92000-0403	Amount of Each Receipt this Period 75.00
	Name of Employer RJ Waltos Ins Ser Inc	Occupatio Special A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1700.00	
_ В.	Full Name (Last, First, Middle Initial) Robert J Waltos, Jr.			Date of Receipt
	Mailing Address 7 Castaways N			0 9 1 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20090921-26-16-16
	Newport Beach	CA	92660-8403	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer RJ Waltos Ins Ser Inc	Occupation Special A		
	Receipt For:	Aggregate	e Year-to-Date	
	Primary General Other (specify) ▼	0 0	1700.00	
c. –	Full Name (Last, First, Middle Initial) Robert J Waltos, Jr.			Date of Receipt
	Mailing Address 7 Castaways N			09 30 2009
	City	State	Zip Code	Transaction ID: 20091008103448-26
	Newport Beach	CA	92660-8403	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer RJ Waltos Ins Ser Inc	Occupation Special A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1700.00	
	SUBTOTAL of Receipts This Page (optional)			275.00
卜	TOTAL This Period (last page this line numbe			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 503 / 574 (check only one) X 11a 11b 11c 12
An	NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insural	nce Company Federal PAC	
۸.	Full Name (Last, First, Middle Initial) Robert J Waltos, Jr.		Date of Receipt
	Mailing Address 7 Castaways N City	State Zip Code	1 0 1 5 2 0 0 9 Transaction ID: 2009102293957-26
	Newport Beach	CA 92660-8403	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer RJ Waltos Ins Ser Inc	Occupation Special Agent	
	Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate Year-to-Date ▼	
	Full Name (Last, First, Middle Initial) Robert J Waltos, Jr.		Date of Receipt
	Mailing Address 7 Castaways N		10 31 2009
	City	State Zip Code	Transaction ID: 20091105152043-26
	Newport Beach	CA 92660-8403	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer RJ Waltos Ins Ser Inc	Occupation Special Agent	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1700.00	
	Full Name (Last, First, Middle Initial) Robert J Waltos, Jr.		Date of Receipt
	Mailing Address 7 Castaways N		1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Newport Beach	State Zip Code CA 92660-8403	Transaction ID: 20091118163132-26 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer RJ Waltos Ins Ser Inc	Occupation Special Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1700.00	
S	JBTOTAL of Receipts This Page (optional)		300.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 504 / 574 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	and Statements may not be sold or used by any persong the name and address of any political committee to urance Company Federal PAC	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Gregory J. Walz Mailing Address 130 S Water Stree	et Apt. 4	Date of Receipt
City Milwaukee FEC ID number of contributing federal political committee.	State Zip Code WI 53204-1499	Transaction ID: 2009111816423-1026 Amount of Each Receipt this Period 10.00
Name of Employer NML Receipt For: Primary General Other (specify)	Occupation Managing Director Aggregate Year-to-Date 210.00	
Full Name (Last, First, Middle Initial) Philip Andrew Ware Mailing Address 7900 N Berwyn Av	/enue	Date of Receipt 0 7 1 5 2 0 0 9
City Glendale FEC ID number of contributing	State Zip Code WI 53209-1810	Transaction ID: 20090720-524-13-0 Amount of Each Receipt this Period 30.00
Name of Employer NML Receipt For: Primary General	Occupation VP Actuary Aggregate Year-to-Date ▼	
Other (specify) Full Name (Last, First, Middle Initial) Philip Andrew Ware	570.00	Date of Receipt
Mailing Address 7900 N Berwyn Av	/enue State Zip Code	07 31 2000004 F24 10 0
Glendale FEC ID number of contributing federal political committee.	WI 53209-1810	Amount of Each Receipt this Period 30.00
Name of Employer NML	Occupation VP Actuary	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 570.00	
SUBTOTAL of Receipts This Page (option	nal)	70.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 505 / 574 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	the name and add	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Philip Andrew Ware Mailing Address 7900 N Berwyn Ave	enue		Date of Receipt
City Glendale FEC ID number of contributing	State WI	Zip Code 53209-1810	Transaction ID: 20090819-592-14-15 Amount of Each Receipt this Period 30.00
Receipt For: Primary Other (specify)	Occupation VP Actua		
Full Name (Last, First, Middle Initial) Philip Andrew Ware Mailing Address 7900 N Berwyn Ave	enue		Date of Receipt 0 8 3 1 2 0 0 9
City Glendale FEC ID number of contributing federal political committee.	State WI	Zip Code 53209-1810	Transaction ID: 20090902-592-15-1 Amount of Each Receipt this Period 30.00
Name of Employer NML Receipt For: Primary General	Occupation VP Actual Aggregate		1
Other (specify) ▼ Full Name (Last, First, Middle Initial) Philip Andrew Ware Mailing Address 7900 N Berwyn Ave	enue.		Date of Receipt
City Glendale FEC ID number of contributing federal political committee.	State WI	Zip Code 53209-1810	0 9 1 5 2 0 0 9 Transaction ID: 20090921-590-17-1 Amount of Each Receipt this Period 30.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation VP Actual Aggregate		
SUBTOTAL of Receipts This Page (optional	l)		90.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 506 / 574 (check only one) X 11a
	Any information copied from such Reports and or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insurar	nce Company	/ Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Philip Andrew Ware			Date of Receipt
	Mailing Address 7900 N Berwyn Avenu	ıe		09 30 2009
	City	State	Zip Code	Transaction ID: 20091008104013-516
	Glendale	WI	53209-1810	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer NML	Occupation VP Actua		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 570.00	
- В.	Full Name (Last, First, Middle Initial) Philip Andrew Ware			Date of Receipt
	Mailing Address 7900 N Berwyn Avenu	ie		10 15 2009
	City	State	Zip Code	Transaction ID: 20091015164625-515
	Glendale	WI	53209-1810	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer NML	Occupation VP Actua		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 570.00	
- C.	Full Name (Last, First, Middle Initial)			Date of Receipt
С.	Philip Andrew Ware Mailing Address 7900 N Berwyn Avenu	ne		1 0 3 1 2 0 0 9
	City	State	Zip Code	Transaction ID: 20091105152628-515
	Glendale	WI	53209-1810	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer NML	Occupation VP Actua		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 570.00	
	SUBTOTAL of Receipts This Page (optional) .			90.00
f	TOTAL This Period (last page this line numbe			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 507 / 574 (check only one) X
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may i e name and addr	not be sold or used by any perso ess of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	nce Company I	Federal PAC	
۱ A .	Full Name (Last, First, Middle Initial) Philip Andrew Ware			Date of Receipt
	Mailing Address 7900 N Berwyn Avenu	ue		1 1 1 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 2009111816423-516
	Glendale	WI	53209-1810	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer NML	Occupation VP Actuar	у	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 570.00	
В.	Full Name (Last, First, Middle Initial) Andrew T. Wassweiler			Date of Receipt
	Mailing Address 6746 River Terrace D			11 15 2009
	City	State	Zip Code	Transaction ID: 2009111816423-813
	Franklin	WI	53132	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		10.00
	Name of Employer NML	Occupation Director		
	Receipt For:		Year-to-Date ▼	-
	Primary General	riggrogato	210.00	1
	Other (specify)	0 0	210.00	
C.	Full Name (Last, First, Middle Initial) Alison Watson			Date of Receipt
	Mailing Address 629 Constitution Ave I Apt 105			07 15 7 2009
	City	State DC	Zip Code	Transaction ID: 20090720-1078-13-0
	Washington FEC ID number of contributing federal political committee.	C	20002-6086	Amount of Each Receipt this Period 50.00
	Name of Employer NML	Occupation Dir Fed Re	elations	
	Receipt For:		Year-to-Date ▼	7
	Primary General Other (specify) ▼		1050.00	
	SUBTOTAL of Receipts This Page (optional)	1		90.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 508 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Alison Watson Mailing Address 629 Constitution Ave Apt 105 City Washington FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	· · ·	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Alison Watson Mailing Address 629 Constitution Aver City Washington FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)		Date of Receipt M M M
Full Name (Last, First, Middle Initial) Alison Watson Mailing Address 629 Constitution Aver City Washington FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code DC 20002-6086 C Occupation Dir Fed Relations Aggregate Year-to-Date 1050.00	Date of Receipt M M M / D D / Y Y Y Y Y O 8 3 1 20090902-1142-15-1 Amount of Each Receipt this Period 50.00
SUBTOTAL of Receipts This Page (optional) .		150.00

	SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate scho for each category Detailed Summary	of the (criccic only only)
	Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	ne name and address of any political o	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
∠ 4.	Full Name (Last, First, Middle Initial) Alison Watson Mailing Address 629 Constitution Ave	nua	Date of Receipt
	City	State Zip Code	0 9 1 5 2 0 0 9 Transaction ID: 20090921-1132-17-1
	Washington	DC 20002-6086	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer NML	Occupation Dir Fed Relations	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	50.00
_ 3.	Full Name (Last, First, Middle Initial) Alison Watson		Date of Receipt
	Mailing Address 629 Constitution Ave	09 30 2009	
	City	State Zip Code	Transaction ID: 20091008104013-1059
	Washington FEC ID number of contributing federal political committee.	DC 20002-6086	Amount of Each Receipt this Period 50.00
	Name of Employer NML	Occupation Dir Fed Relations	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	50.00
- :.	Full Name (Last, First, Middle Initial) Alison Watson Mailing Address 629 Constitution Ave	nue	Date of Receipt
	City	State Zip Code	1 0 1 5 2 0 0 9 Transaction ID: 20091015164625-1057
	Washington	DC 20002-6086	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer NML	Occupation Dir Fed Relations	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	50.00
	SUBTOTAL of Receipts This Page (optional)		150.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 510 / 574 (check only one) X
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insuran	ice Company	/ Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Alison Watson			Date of Receipt
	Mailing Address 629 Constitution Aver	nue		10 31 2009
	City Washington	State DC	Zip Code 20002-6086	Transaction ID: 20091105152628-1057
	FEC ID number of contributing federal political committee.	C	20002-0080	Amount of Each Receipt this Period 50.00
	Name of Employer NML	Occupation	on Relations	
	Receipt For: Primary General Other (specify) ▼	++	e Year-to-Date ▼ 1050.00	
- В.	Full Name (Last, First, Middle Initial) Alison Watson			Date of Receipt
	Mailing Address 629 Constitution Aver	nue		1 1
	City	State DC	Zip Code	Transaction ID: 2009111816423-1056
	Washington FEC ID number of contributing federal political committee.	C	20002-6086	Amount of Each Receipt this Period 50.00
	Name of Employer NML	Occupation Dir Fed I	on Relations	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1050.00	
С.	Full Name (Last, First, Middle Initial) Robert J. Welsh			Date of Receipt
	Mailing Address S68 W17598 Marybed	ck		11 15 2009
	City	State	Zip Code	Transaction ID: 2009111816423-949
	Muskego FEC ID number of contributing federal political committee.	C	53150	Amount of Each Receipt this Period 9.00
	Name of Employer NML	Occupation Dir EE C		
	Receipt For: Primary General Other (specify) ▼	, '	e Year-to-Date ▼ 201.00	
	SUBTOTAL of Receipts This Page (optional) .	1		109.00
f	TOTAL This Period (last page this line number	r only)		

	EDULE A (FEC Form 3X MIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 511 / 574 (check only one) X
or for o	formation copied from such Reports and commercial purposes, other than using to ME OF COMMITTEE (In Full)	Statements ma he name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	e Northwestern Mutual Life Insura	ance Company	Federal PAC	
Jef	I Name (Last, First, Middle Initial) frey B. Williams			Date of Receipt
	iling Address 2004 N 72nd Street			07 15 2009
City <u>W</u>	y auwatosa	State WI	Zip Code 53213-1828	Transaction ID: 20090720-594-13-0 Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	C		24.00
Na NA	me of Employer IL	Occupation VP Corp	n Risk Mgmt	
Re	ceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 540.00	
	I Name (Last, First, Middle Initial) frey B. Williams			Date of Receipt
Ма	iling Address 2004 N 72nd Street			07 31 YYYY 2009
City	У	State	Zip Code	Transaction ID: 20090804-594-10-0
<u>W</u> :	auwatosa	WI	53213-1828	Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	C		24.00
Na NN	me of Employer IL	Occupatio VP Corp	n Risk Mgmt	
Re	ceipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	540.00	
	l Name (Last, First, Middle Initial) frey B. Williams			Date of Receipt
Ма	iling Address 2004 N 72nd Street			08 15 2009
City		State	Zip Code	Transaction ID: 20090819-662-14-1
	auwatosa C ID number of contributing	WI	53213-1828	Amount of Each Receipt this Period
fed	eral political committee.	C		24.00
	me of Employer //L	- ' ' '	Risk Mgmt	
Re	ceipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 540.00	
	FOTAL of Receipts This Page (optional)			72.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 512 / 574 (check only one) X
	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	ly not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ice Company	y Federal PAC	
∠ A .	Full Name (Last, First, Middle Initial) Jeffrey B. Williams			Date of Receipt
	Mailing Address 2004 N 72nd Street			08 31 7 2009
	City Wauwatosa	State WI	Zip Code 53213-1828	Transaction ID: 20090902-662-15-1
	FEC ID number of contributing federal political committee.	C	33213-1020	Amount of Each Receipt this Period 24.00
	Name of Employer NML	Occupation VP Corp	on Risk Mamt	
	Receipt For: Primary General Other (specify) ▼	, '	e Year-to-Date ▼ 540.00	
- В.	Full Name (Last, First, Middle Initial) Jeffrey B. Williams			Date of Receipt
	Mailing Address 2004 N 72nd Street			09 15 2009
	City	State	Zip Code	Transaction ID: 20090921-659-17-1
	Wauwatosa FEC ID number of contributing federal political committee.	C	53213-1828	Amount of Each Receipt this Period 24.00
	Name of Employer NML	Occupation VP Corp	on Risk Mgmt	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 540.00	
- С.	Full Name (Last, First, Middle Initial) Jeffrey B. Williams			Date of Receipt
	Mailing Address 2004 N 72nd Street			09 30 7 2009
	City	State	Zip Code	Transaction ID: 20091008104013-585
	Wauwatosa FEC ID number of contributing federal political committee.	C	53213-1828	Amount of Each Receipt this Period 24.00
	Name of Employer NML	Occupation VP Corp	on Risk Mgmt	
	Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	, ' 	e Year-to-Date ▼ 540.00	
	SUBTOTAL of Receipts This Page (optional) .	1		72.00
f	TOTAL This Period (last page this line number	r only)		

SCHEDULE A (FEC Form 3)	Use separate scl for each category Detailed Summar	of the
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	the name and address of any political	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Jeffrey B. Williams Mailing Address 2004 N 72nd Stree	t	Date of Receipt
City Wauwatosa FEC ID number of contributing	State Zip Code WI 53213-1828	1 0 1 5 2 0 0 9 Transaction ID: 20091015164625-584 Amount of Each Receipt this Period 24.00
Receipt For: Primary Other (specify) ▼	Occupation VP Corp Risk Mgmt Aggregate Year-to-Date ▼	540.00
Full Name (Last, First, Middle Initial) Jeffrey B. Williams Mailing Address 2004 N 72nd Street	t	Date of Receipt 1 0 3 1 2 0 0 9
City Wauwatosa FEC ID number of contributing federal political committee.	State Zip Code WI 53213-1828	Transaction ID: 20091105152628-584 Amount of Each Receipt this Period 24.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation VP Corp Risk Mgmt Aggregate Year-to-Date ▼	540.00
Full Name (Last, First, Middle Initial) Jeffrey B. Williams Mailing Address 2004 N 72nd Street	t	Date of Receipt 1 1 1 5 2 0 0 9
City Wauwatosa FEC ID number of contributing federal political committee.	State Zip Code WI 53213-1828	Transaction ID: 2009111816423-585 Amount of Each Receipt this Period 24.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation VP Corp Risk Mgmt Aggregate Year-to-Date	540.00
SUBTOTAL of Receipts This Page (option	al)	72.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 514 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	name and add	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) John A Williamson, Jr. Mailing Address 608 Euclid Avenue City Birmingham FEC ID number of contributing federal political committee. Name of Employer NM Fncl Nwk Of AL Inc Receipt For: Primary General	State AL C Occupation Special A	Zip Code 35213-2518	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Other (specify) ▼ Full Name (Last, First, Middle Initial) John A Williamson, Jr. Mailing Address 608 Euclid Avenue City Birmingham FEC ID number of contributing federal political committee. Name of Employer NM Fncl Nwk Of AL Inc	State AL C Occupation Special A	Zip Code 35213-2518	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) John A Williamson, Jr. Mailing Address 608 Euclid Avenue City Birmingham FEC ID number of contributing federal political committee.		Zip Code 35213-2518	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer NM Fncl Nwk Of AL Inc Receipt For: Primary General Other (specify) ▼	Occupation Special Aggregate		
SUBTOTAL of Receipts This Page (optional)			624.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 515 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	Statements may not be sold or used by any personal part of any political committee to company Federal PAC	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) John A Williamson, Jr. Mailing Address 608 Euclid Avenue City Birmingham FEC ID number of contributing federal political committee.	State Zip Code AL 35213-2518 C	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer NM Fncl Nwk Of AL Inc Receipt For: Primary General Other (specify)	Special Agent Aggregate Year-to-Date ▼ 4368.00	
Full Name (Last, First, Middle Initial) John A Williamson, Jr. Mailing Address 608 Euclid Avenue		Date of Receipt M M M
City	State Zip Code	Transaction ID: 20090921-11-16-16
Birmingham FEC ID number of contributing federal political committee. Name of Employer NM Fncl Nwk Of AL Inc	AL 35213-2518 C Occupation	Amount of Each Receipt this Period 208.00
Receipt For: Primary General Other (specify)	Special Agent Aggregate Year-to-Date ▼ 4368.00	
Full Name (Last, First, Middle Initial) John A Williamson, Jr.		Date of Receipt
Mailing Address 608 Euclid Avenue		09 30 YYYYY 2009
City	State Zip Code	Transaction ID: 20091008103448-11
Birmingham FEC ID number of contributing federal political committee.	AL 35213-2518	Amount of Each Receipt this Period 208.00
Name of Employer NM Fncl Nwk Of AL Inc	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4368.00	
SUBTOTAL of Receipts This Page (optional)		624.00
TOTAL This Period (last page this line number	· · · · · · · · · · · · · · · · · · ·	

SCHEDULE A (FEC Form : ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 516 / 574 (check only one) X
Any information copied from such Reports or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insertions of the commercial purposes, other than using the commercial purposes.	and Statements may not be sold or used by any persong the name and address of any political committee to	
Full Name (Last, First, Middle Initial) John A Williamson, Jr.		Date of Receipt
Mailing Address 608 Euclid Avenu City Birmingham	State Zip Code AL 35213-2518	Transaction ID: 2009102293957-11 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 33213-2310	208.00
Name of Employer NM Fncl Nwk Of AL Inc Receipt For: Primary General Other (specify) ▼	Occupation Special Agent Aggregate Year-to-Date ▼ 4368.00	
Full Name (Last, First, Middle Initial) John A Williamson, Jr. Mailing Address 608 Euclid Avenu	le	Date of Receipt 1 0 3 1 2 0 0 9
City Birmingham	State Zip Code AL 35213-2518	Transaction ID: 20091105152043-11 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	208.00
Name of Employer NM Fncl Nwk Of AL Inc	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4368.00	
Full Name (Last, First, Middle Initial) John A Williamson, Jr. Mailing Address 608 Euclid Avenu	ie	Date of Receipt 1 1 1 5 2 0 0 9
City Birmingham	State Zip Code AL 35213-2518	Transaction ID: 20091118163132-11 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 33213-2310	208.00
Name of Employer NM Fncl Nwk Of AL Inc	Occupation Special Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4368.00	
SUBTOTAL of Receipts This Page (optic	onal)	624.00

SCHEDULE A (FEC Forr	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 517 / 574 (check only one) X
or for commercial purposes, other than NAME OF COMMITTEE (In Full)	orts and Statements may not be sold or used by any person using the name and address of any political committee to Insurance Company Federal PAC	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial	. ,	Date of Receipt
. Brian D. Wilson Mailing Address 11128 N Whilt	on Road	08 31 2009
City Mequon	State Zip Code WI 53097-3439	Transaction ID: 20090902-1185-15-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	19.00
Name of Employer NML	Occupation Dir Ips Mkt & SIs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 303.00	
Full Name (Last, First, Middle Initial Brian D. Wilson	·	Date of Receipt
Mailing Address 11128 N Whili	09 15 Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: 20090921-1174-17-1
Mequon	WI 53097-3439	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	19.00
Name of Employer NML	Occupation Dir Ips Mkt & SIs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 303.00	
Full Name (Last, First, Middle Initial Brian D. Wilson		Date of Receipt
Mailing Address 11128 N Whilt	on Road	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Meguon	State Zip Code WI 53097-3439	Transaction ID: 20091008104013-110 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	19.00
Name of Employer NML	Occupation Dir Ips Mkt & SIs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 303.00	
SUBTOTAL of Receipts This Page (c	pptional)	57.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 518 / 574 (check only one) X
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) Brian D. Wilson			Date of Receipt
	Mailing Address 11128 N Whilton Roa City	State	Zip Code	1 0 1 5 20091015164625-1099
	Mequon FEC ID number of contributing federal political committee.	C	53097-3439	Amount of Each Receipt this Period 19.00
	Name of Employer NML Receipt For: Primary General	Occupation Dir Ips M		1
- B.	Full Name (Last, First, Middle Initial) Brian D. Wilson Mailing Address 11128 N Whilton Roa	d	300.00	Date of Receipt
	City Mequon FEC ID number of contributing	State WI	Zip Code 53097-3439	Transaction ID: 20091105152628-1099 Amount of Each Receipt this Period 19.00
	federal political committee. Name of Employer NML	Occupation Dir Ips N		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 303.00	
C.	Full Name (Last, First, Middle Initial) Brian D. Wilson Mailing Address 11128 N Whilton Roa	d		Date of Receipt 1 1 1 5 2 0 0 9
	City Mequon	State WI	Zip Code 53097-3439	Transaction ID: 2009111816423-1098 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		19.00
	Name of Employer NML Receipt For:	Occupation Dir Ips N		
	Primary General Other (specify) ▼	7 iggi ogai.	303.00	
	SUBTOTAL of Receipts This Page (optional) .			57.00
	TOTAL This Period (last page this line number	r only)	1	

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 519 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
4	Any information copied from such Reports and or for commercial purposes, other than using the	Statements magne name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	nce Company	Federal PAC	
∠ 4.	Full Name (Last, First, Middle Initial) James R Worrell			Date of Receipt
	Mailing Address 2218 Hopedale Aven	ue		07 15 2009
	City Charlotte	State NC	Zip Code 28207-2130	Transaction ID: 20090720-1181-13-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	2020, 2100	100.00
	Name of Employer Worrell Gen Agt Inc	Occupatio Special A		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 2640.00	
_ 3.	Full Name (Last, First, Middle Initial) James R Worrell			Date of Receipt
	Mailing Address 2218 Hopedale Avenue			07 31 2009
	City Charlotte	State NC	Zip Code	Transaction ID: 20090804-1179-10-0
	FEC ID number of contributing federal political committee.	C	28207-2130	Amount of Each Receipt this Period
	Name of Employer Worrell Gen Agt Inc	Occupation Special A		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2640.00	
_ ;.	Full Name (Last, First, Middle Initial) James R Worrell			Date of Receipt
	Mailing Address 2218 Hopedale Aven	ue		0 8 1 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Charlotte	State NC	Zip Code 28207-2130	Transaction ID: 20090819-4-14-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20207 2100	100.00
	Name of Employer Worrell Gen Agt Inc	Occupatio Special A		
	Receipt For: Primary General Other (specify) ▼	_ ' ' '	e Year-to-Date ▼ 2640.00	
Г				300.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 520 / 5/4 (check only one)		
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	rance Company	Federal PAC			
Full Name (Last, First, Middle Initial) James R Worrell			Date of Receipt		
City Charlotte	State NC	Zip Code 28207-2130	Transaction ID: 20090902-4-14-46 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		100.00		
Name of Employer Worrell Gen Agt Inc	Occupation Special A				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2640.00			
Full Name (Last, First, Middle Initial) James R Worrell			Date of Receipt		
Mailing Address 2218 Hopedale Avenue			0 9 1 5 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Charlotte	State NC	Zip Code 28207-2130	Transaction ID: 20090921-4-16-16 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	1010	208.00		
Name of Employer Worrell Gen Agt Inc	Occupation Special A				
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 2640.00			
Full Name (Last, First, Middle Initial) James R Worrell			Date of Receipt		
Mailing Address 2218 Hopedale Ave	enue		0 9 3 0 2 0 0 9		
City Charlotte	State NC	Zip Code 28207-2130	Transaction ID: 20091008103448-4		
FEC ID number of contributing federal political committee.	C	20207-2130	Amount of Each Receipt this Period 208.00		
Name of Employer Worrell Gen Agt Inc	Occupation Special A				
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 2640.00			
SUBTOTAL of Receipts This Page (optional	al)		516.00		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 521 / 574 (check only one) X		
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	and Statements may not be sold or used by any persong the name and address of any political committee to urance Company Federal PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.		
Full Name (Last, First, Middle Initial) James R Worrell Mailing Address 2218 Hopedale Av	renue	Date of Receipt		
City Charlotte	State Zip Code NC 28207-2130	1 0 1 5 2 0 0 9 Transaction ID: 2009102293957-4 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee. Name of Employer Worrell Gen Agt Inc	Occupation Special Agent	208.00		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2640.00			
Full Name (Last, First, Middle Initial) James R Worrell Mailing Address 2218 Hopedale Av	renue	Date of Receipt 10 31 2009		
City	·			
Charlotte FEC ID number of contributing federal political committee.	NC 28207-2130	Amount of Each Receipt this Period 208.00		
Name of Employer Worrell Gen Agt Inc	Occupation Special Agent			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2640.00			
Full Name (Last, First, Middle Initial) James R Worrell		Date of Receipt		
Mailing Address 2218 Hopedale Av	renue	11 15 2009		
City	State Zip Code NC 28207-2130	Transaction ID: 20091118163132-4		
Charlotte FEC ID number of contributing federal political committee.	NC 28207-2130	Amount of Each Receipt this Period 208.00		
Name of Employer Worrell Gen Agt Inc	Occupation Special Agent			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2640.00			
SUBTOTAL of Receipts This Page (option	nal)	624.00		

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 522 / 574 (check only one) X
or for cor	mation copied from such Reports and nmercial purposes, other than using the OF COMMITTEE (In Full) Northwestern Mutual Life Insurar	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	ame (Last, First, Middle Initial) W Wright, II			Date of Receipt
Mailin — City	g Address 4463 Jett Road North	west State	Zip Code	0 7 1 5 2 0 0 9 Transaction ID: 20090720-1226-13-1
Atlar	nta	GA	30327-3563	Amount of Each Receipt this Period
FEC I	D number of contributing al political committee.	C		20.84
Name Good	of Employer win Wright Inc	Occupation Special A		
	pt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 833.44	
John \	ame (Last, First, Middle Initial) W Wright, II g Address 4463 Jett Road North	l		Date of Receipt
iviaiiii	y Address 4400 Jell Hoad North	07 31 2009		
City		State	Zip Code	Transaction ID: 20090804-1223-10-0
<u>Atlar</u>	Atlanta GA FEC ID number of contributing federal political committee.		30327-3563	Amount of Each Receipt this Period
				20.84
Name Good	e of Employer win Wright Inc	Occupation Special A		
	pt For:	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼	0 0	833.44	
	ame (Last, First, Middle Initial) W Wright, II			Date of Receipt
Mailin	g Address 4463 Jett Road North	west		0 8 1 5 2 0 0 9
City		State	Zip Code	Transaction ID: 20090819-48-14-0
<u>Atlar</u>	nta	GA	30327-3563	Amount of Each Receipt this Period
	D number of contributing al political committee.	C		20.84
	of Employer win Wright Inc	Occupatio Special A	Agent	
	pt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 833.44	
SUBTO	TAL of Receipts This Page (optional)			62.52

	ULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 523 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16
or for comm	tion copied from such Reports and Si lercial purposes, other than using the OF COMMITTEE (In Full) orthwestern Mutual Life Insurance	e name and addr	ess of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	ne (Last, First, Middle Initial)			Date of Receipt
	Address 4463 Jett Road Northw	vest		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Atlanta		State GA	Zip Code 30327-3563	Transaction ID: 20090902-48-14-4 Amount of Each Receipt this Period
FEC ID	number of contributing olitical committee.	C	30327-3303	20.84
Name of Goodwir	Employer I Wright Inc	Occupation Special Ag	gent	
	For: mary General her (specify) ♥	Aggregate `	Year-to-Date ▼ 833.44	
Full Nam	ne (Last, First, Middle Initial) Wright, II	1		Date of Receipt
Mailing A	Address 4463 Jett Road Northw	09 15 2009		
City <u>Atlanta</u>		State GA	Zip Code 30327-3563	Transaction ID: 20090921-49-16-1
	number of contributing olitical committee.	C		100.00
	Employer Wright Inc	Occupation Special Ac	gent	
	For: mary General her (specify) ♥	Aggregate `	Year-to-Date ▼ 833.44	
Full Nam	ne (Last, First, Middle Initial) Wright, II	1		Date of Receipt
Mailing A		vest		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Atlanta</u>		State GA	Zip Code 30327-3563	Transaction ID: 20091008103448-4 Amount of Each Receipt this Period
	number of contributing olitical committee.	C		100.00
Name of Goodwir	Employer I Wright Inc	Occupation Special Ag	gent	
	For: mary General her (specify) ♥	Aggregate \	Year-to-Date ▼ 833.44	
SUBTOTA	L of Receipts This Page (optional)			220.84

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 524 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	Statements may not be sold or used by any personal ename and address of any political committee to note Company Federal PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) John W Wright, II Mailing Address 4463 Jett Road North City Atlanta FEC ID number of contributing federal political committee. Name of Employer Goodwin Wright Inc Receipt For: Primary General Other (specify)	west State Zip Code GA 30327-3563 C Occupation Special Agent Aggregate Year-to-Date ▼ 833.44	Date of Receipt 10 15 2009102293957-49 Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) John W Wright, II Mailing Address 4463 Jett Road North City Atlanta FEC ID number of contributing federal political committee. Name of Employer Goodwin Wright Inc Receipt For: Primary General	west State Zip Code GA 30327-3563 C Occupation Special Agent Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) ▼ Full Name (Last, First, Middle Initial) John W Wright, II Mailing Address 4463 Jett Road North City Atlanta FEC ID number of contributing federal political committee. Name of Employer Goodwin Wright Inc	State Zip Code GA 30327-3563 C Occupation Special Agent	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	Aggregate Year-to-Date ▼ 833.44	300.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 525 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial)	ice Company	7 I edelal FAO	
Α.	Conrad C. York Mailing Address 522 Heather Lane			Date of Receipt 0 7 1 5 2 0 0 9
	City Wales	State WI	Zip Code 53183-9768	Transaction ID: 20090720-795-13-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		55.00
	Name of Employer NML	Occupation VP Mark		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1155.00	
- В.	Full Name (Last, First, Middle Initial) Conrad C. York Mailing Address 522 Heather Lane	ı		Date of Receipt 0 7 3 1 2 0 0 9
	City	State	Zip Code	Transaction ID: 20090804-794-10-0
	Wales	WI	53183-9768	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		55.00
	Name of Employer NML	Occupation VP Mark		
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 1155.00	
- C.	Full Name (Last, First, Middle Initial) Conrad C. York			Date of Receipt
	Mailing Address 522 Heather Lane			08 15 2009
	City	State	Zip Code	Transaction ID: 20090819-861-14-15
	Wales FEC ID number of contributing federal political committee.	C	53183-9768	Amount of Each Receipt this Period 55.00
	Name of Employer NML	Occupatio VP Mark		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1155.00	
	SUBTOTAL of Receipts This Page (optional) .	1		165.00
	TOTAL This Period (last page this line number	r only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 526 / 574 (check only one) X
	Any information copied from such Reports and S or for commercial purposes, other than using the \ensuremath{S}	Statements may e name and ado	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	nce Company	Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Conrad C. York			Date of Receipt
	Mailing Address 522 Heather Lane	08 31 2009		
	City <u>Wales</u>	State WI	Zip Code 53183-9768	Transaction ID: 20090902-861-15-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	301000700	55.00
	Name of Employer NML	Occupation VP Market		
	Receipt For: Primary General Other (specify) ▼	- '	Year-to-Date ▼ 1155.00	
В.	Full Name (Last, First, Middle Initial) Conrad C. York			Date of Receipt
	Mailing Address 522 Heather Lane	09 15 2009		
	City	State	Zip Code	Transaction ID: 20090921-856-17-1
	Wales	WI	53183-9768	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		55.00
	Name of Employer NML	Occupation VP Market		
	Receipt For:	- '	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	1155.00]
C.	Full Name (Last, First, Middle Initial) Conrad C. York			Date of Receipt
	Mailing Address 522 Heather Lane			09 30 2009
	City	State	Zip Code	Transaction ID: 20091008104013-783
	Wales FEC ID number of contributing federal political committee.	C	53183-9768	Amount of Each Receipt this Period 55.00
	Name of Employer NML	Occupation VP Market		
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1155.00	
	SUBTOTAL of Receipts This Page (optional)	1		165.00
	TOTAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 527 / 574 (check only one) X 11a
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and add	lress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	The Northwestern Mutual Life Insurance	ice Company	Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Conrad C. York			Date of Receipt
	Mailing Address 522 Heather Lane			10 15 2009
	City	State	Zip Code	Transaction ID: 20091015164625-782
	Wales	WI	53183-9768	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		55.00
	Name of Employer NML	Occupation VP Market		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1155.00	
- В.	Full Name (Last, First, Middle Initial) Conrad C. York			Date of Receipt
	Mailing Address 522 Heather Lane			10 31 2009
	City	State	Zip Code	Transaction ID: 20091105152628-782
	Wales	WI	53183-9768	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		55.00
	Name of Employer NML	Occupation VP Market		
	Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	1155.00	
- C.	Full Name (Last, First, Middle Initial) Conrad C. York			Date of Receipt
	Mailing Address 522 Heather Lane			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 2009111816423-782
	Wales	WI	53183-9768	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		55.00
	Name of Employer NML	Occupation VP Market		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1155.00	
	SUBTOTAL of Receipts This Page (optional)			165.00
-	TOTAL This Period (last page this line number		<u> </u>	

	CHEDULE A (FEC Form 3X EMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 528 / 574 (check only one) X
Ai or	ny information copied from such Reports and for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may the name and add	r not be sold or used by any persitress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The Northwestern Mutual Life Insura	ance Company	Federal PAC	
٨.	Full Name (Last, First, Middle Initial) Catherine M. Young			Date of Receipt
	Mailing Address 929 N Astor Street L	Jnit		07 / 31 / 2009
	City Milwaukee	State WI	Zip Code 53202-7000	Transaction ID: 20090804-1135-10-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer NML	Occupation Asst Gc 8	n & Asst Sec	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00	
. –	Full Name (Last, First, Middle Initial) Catherine M. Young			Date of Receipt
	Mailing Address 929 N Astor Street Unit			08 15 2009
	City	State	Zip Code	Transaction ID: 20090819-1201-14-15
	Milwaukee FEC ID number of contributing federal political committee.	C	53202-7000	Amount of Each Receipt this Period 20.00
	Name of Employer NML	Occupation Asst Gc 8	Asst Sec	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00	
	Full Name (Last, First, Middle Initial) Catherine M. Young			Date of Receipt
	Mailing Address 929 N Astor Street U	Jnit		08 31 2009
	City Milwaukee	State WI	Zip Code 53202-7000	Transaction ID: 20090902-1201-15-1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33202-7000	20.00
	Name of Employer NML	Occupation Asst Gc 8	Asst Sec	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00	
	SUBTOTAL of Receipts This Page (optional)	1		60.00

	EDULE A (FEC Form 3X) IZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 529 / 574 (check only one) X 11a
or for co	ommercial purposes, other than using the IE OF COMMITTEE (In Full)	e name and addres	s of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
The	Northwestern Mutual Life Insuran	ce Company Fe	ederal PAC	
	Name (Last, First, Middle Initial) erine M. Young			Date of Receipt
	ng Address 929 N Astor Street Ur		7'n Code	09 15 2009
City Milw	vaukee	State W1	Zip Code 53202-7000	Transaction ID: 20090921-1190-17-1 Amount of Each Receipt this Period
FEC	ID number of contributing ral political committee.	C		20.00
Nam NML	e of Employer -	Occupation Asst Gc & A	asst Sec	
Rece	eipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 360.00	
. Cath	Name (Last, First, Middle Initial) erine M. Young			Date of Receipt
Mailii	ng Address 929 N Astor Street Ur	09 30 2009		
City		State	Zip Code	Transaction ID: 20091008104013-111
	vaukee	WI	53202-7000	Amount of Each Receipt this Period
	ID number of contributing ral political committee.	C		20.00
Nam NML	e of Employer -	Occupation Asst Gc & A	usst Sec	
Rece	eipt For: Primary General Other (specify) ▼	Aggregate Ye		
	Name (Last, First, Middle Initial) erine M. Young			Date of Receipt
Maili	ng Address 929 N Astor Street Ur	it		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: 20091015164625-1115
FEC	vaukee ID number of contributing ral political committee.	C	53202-7000	Amount of Each Receipt this Period 20.00
Nam NML	e of Employer -	Occupation Asst Gc & A	asst Sec	7
Rece	eipt For: Primary General Other (specify) ♥	Aggregate Ye		
	DTAL of Receipts This Page (optional) .	-		60.00

mercial purposes, other than using OF COMMITTEE (In Full)	State Zip Code WI 53202-7000 C Occupation Asst Gc & Asst Sec Aggregate Year-to-Date 360.00	Date of Receipt M M M
orthwestern Mutual Life Insur me (Last, First, Middle Initial) ne M. Young Address 929 N Astor Street ukee number of contributing political committee. of Employer t For: rimary General Other (specify) me (Last, First, Middle Initial)	Unit State Zip Code WI 53202-7000 C Occupation Asst Gc & Asst Sec Aggregate Year-to-Date ▼ 360.00	Transaction ID: 20091105152628-1115 Amount of Each Receipt this Period 20.00 Date of Receipt
ne M. Young Address 929 N Astor Street ukee number of contributing political committee. of Employer t For: rimary General Other (specify) me (Last, First, Middle Initial)	State Zip Code WI 53202-7000 C Occupation Asst Gc & Asst Sec Aggregate Year-to-Date 360.00	Transaction ID: 20091105152628-1115 Amount of Each Receipt this Period 20.00 Date of Receipt
ukee I number of contributing political committee. of Employer It For: Irimary General Other (specify) me (Last, First, Middle Initial)	State Zip Code WI 53202-7000 C Occupation Asst Gc & Asst Sec Aggregate Year-to-Date 360.00	Transaction ID: 20091105152628-1115 Amount of Each Receipt this Period 20.00 Date of Receipt
o number of contributing political committee. of Employer It For: Orimary General Other (specify) The me (Last, First, Middle Initial)	Occupation Asst Gc & Asst Sec Aggregate Year-to-Date 360.00	Amount of Each Receipt this Period 20.00 Date of Receipt
o number of contributing political committee. of Employer It For: Orimary General Other (specify) The me (Last, First, Middle Initial)	Occupation Asst Gc & Asst Sec Aggregate Year-to-Date ▼ 360.00	Date of Receipt
of Employer It For: General Other (specify) ▼ me (Last, First, Middle Initial)	Asst Gc & Asst Sec Aggregate Year-to-Date ▼ 360.00	
t For: Irimary General Other (specify) ▼ me (Last, First, Middle Initial)	Asst Gc & Asst Sec Aggregate Year-to-Date ▼ 360.00	
rimary General Other (specify) ▼ me (Last, First, Middle Initial)	360.00	<u> </u>
other (specify) ▼ me (Last, First, Middle Initial)		<u> </u>
		<u> </u>
Address 929 N Astor Street	1 1 1 1 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	State Zip Code	Transaction ID: 2009111816423-1114
ukee	WI 53202-7000	Amount of Each Receipt this Period
number of contributing political committee.	C	20.00
of Employer	Occupation Asst Gc & Asst Sec	
t For:	Aggregate Year-to-Date ▼	
rimary General Other (specify) ♥	360.00	
me (Last, First, Middle Initial) Young	I	Date of Receipt
Address 6728 Maple Terrace	е	10 31 2009
	State Zip Code	Transaction ID: 20091105152628-909
<u>ratosa</u>	WI 53213-3259	Amount of Each Receipt this Period
number of contributing political committee.	C	11.00
of Employer	Occupation Dir IS Ops	
	Aggregate Year-to-Date ▼	_
t For:	210.00	
	219.00	
p	Employer For: General	Employer Occupation Dir IS Ops For: imary General General

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 531 / 574 (check only one) X 11a
Ai or	ny information copied from such Reports and for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insural	nce Company	/ Federal PAC	
<u> </u>	Full Name (Last, First, Middle Initial) John E. Young			Date of Receipt
	Mailing Address 6728 Maple Terrace			11 15 2009
	City Wauwatosa	State WI	Zip Code 53213-3259	Transaction ID: 2009111816423-909 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		11.00
	Name of Employer NML	Occupation Dir IS Or		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 219.00	
— 3.	Full Name (Last, First, Middle Initial) Michael L. Youngman	<u> </u>		Date of Receipt
	Mailing Address 716 E Sylvan Avenue	•		07 15 2009
	City Whitefiels Box	State W1	Zip Code	Transaction ID: 20090720-988-13-0
	Whitefish Bay FEC ID number of contributing federal political committee.	C	53217-5350	Amount of Each Receipt this Period 60.00
	Name of Employer NML	Occupation VP Govt		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1212.00	
 }.	Full Name (Last, First, Middle Initial) Michael L. Youngman			Date of Receipt
	Mailing Address 716 E Sylvan Avenue	•		07 31 2009
	City Whitefish Bay	State W1	Zip Code 53217-5350	Transaction ID: 20090804-986-10-0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30217 3030	60.00
	Name of Employer NML	Occupation VP Govt		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1212.00	
s	SUBTOTAL of Receipts This Page (optional)			131.00
	GUBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 532 / 574 (check only one) X
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements mane name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insural	nce Company	Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Michael L. Youngman			Date of Receipt
	Mailing Address 716 E Sylvan Avenue)		08 15 2009
	City Whitefish Bay	State WI	Zip Code 53217-5350	Transaction ID: 20090819-1053-14-15 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer NML	Occupatio VP Govt		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1212.00	
– В.	Full Name (Last, First, Middle Initial) Michael L. Youngman			Date of Receipt
	Mailing Address 716 E Sylvan Avenue)		08 31 2009
	City	State	Zip Code	Transaction ID: 20090902-1053-15-1
	Whitefish Bay	WI	53217-5350	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer NML	Occupatio VP Govt		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1212.00	
_ C.	Full Name (Last, First, Middle Initial) Michael L. Youngman			Date of Receipt
	Mailing Address 716 E Sylvan Avenue)		09 15 2009
	City	State	Zip Code	Transaction ID: 20090921-1046-17-1
	Whitefish Bay FEC ID number of contributing federal political committee.	C	53217-5350	Amount of Each Receipt this Period 60.00
	Name of Employer Occupa NML VP Go			
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1212.00	
Γ	SUBTOTAL of Receipts This Page (optional)			180.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 533 / 574 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may g the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	rance Company	Federal PAC	
Full Name (Last, First, Middle Initial) Michael L. Youngman			Date of Receipt
Mailing Address 716 E Sylvan Aver	nue		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Whitefish Bay	State WI	Zip Code 53217-5350	Transaction ID: 20091008104013-972 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		60.00
Name of Employer NML	Occupation VP Govt		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1212.00	
Full Name (Last, First, Middle Initial) Michael L. Youngman			Date of Receipt
Mailing Address 716 E Sylvan Aver	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Whitefish Bay	State WI	Zip Code 53217-5350	Transaction ID: 20091015164625-97 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	000	60.00
Name of Employer NML	Occupation VP Govt		
Receipt For: Primary General Other (specify) ▼	- '	Year-to-Date ▼ 1212.00	
Full Name (Last, First, Middle Initial) Michael L. Youngman			Date of Receipt
Mailing Address 716 E Sylvan Aver	nue		M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City Whitefish Bay	State WI	Zip Code 53217-5350	Transaction ID: 20091105152628-97 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	000	60.00
Name of Employer NML	Occupation VP Govt		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1212.00	
SUBTOTAL of Receipts This Page (options	al)		180.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 534 / 574 (check only one) X
0	ny information copied from such Reports and r for commercial purposes, other than using the	Statements mane name and add	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	nce Company	Federal PAC	
۸.	Full Name (Last, First, Middle Initial) Michael L. Youngman			Date of Receipt
	Mailing Address 716 E Sylvan Avenue			11 1 15 2009
	City Whitefish Bay	State WI	Zip Code 53217-5350	Transaction ID: 2009111816423-971 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		60.00
	Name of Employer NML	Occupatio VP Govt		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1212.00	
	Full Name (Last, First, Middle Initial) Thomas Scott Zach	Date of Receipt		
	Mailing Address 6630 County Creek Lane			07 15 2009
	City	State	Zip Code	Transaction ID: 20090720-1238-13-1
	Cedar Rapids	IA	52403-7023	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		882.00	
	Full Name (Last, First, Middle Initial) Thomas Scott Zach			Date of Receipt
	Mailing Address 6630 County Creek Lane			07 31 2009
	City	State IA	Zip Code	Transaction ID: 20090804-1235-10-0
	Cedar Rapids FEC ID number of contributing federal political committee.	C	52403-7023	Amount of Each Receipt this Period 42.00
	Name of Employer Occupal Self-Employed General		n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 882.00	
	SUBTOTAL of Receipts This Page (optional)	1		144.00

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee. NAME OF COMMITTEE (in Full) The Northwestern Mutual Life Insurance Company Federal PAC		SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 535 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A. Thomas Scott Zach Mailing Address 6630 County Creek Lane City State Zip Code Cedar Rapids IA 52403-7023 FEC ID number of contributing federal political committee. C C Cupation General Insurance Agent Aggregate Year-to-Date ▼ Pill Name (Last, First, Middle Initial) Thomas Scott Zach Mailing Address 6630 County Creek Lane City State Zip Code Cedar Rapids IA 52403-7023 FEC ID number of contributing federal political committee. C C Date of Receipt Amount of Each Receipt this Period Acceptate Amount of Each Receipt this Period Transaction ID: 20090902-60-14-46 Amount of Each Receipt this Period Date of Receipt Transaction ID: 20090902-60-14-46 Amount of Each Receipt this Period Transaction ID: 20090902-60-14-46 Amount of Each Receipt this Period Transaction ID: 20090902-60-14-46 Amount of Each Receipt this Period Transaction ID: 20090902-60-14-46 Amount of Each Receipt this Period Transaction ID: 20090902-60-14-46 Amount of Each Receipt this Period Amount of Each Receipt this Period Transaction ID: 20090902-60-14-46 Amount of Each Receipt this Period Transaction ID: 20090902-60-14-46 Amount of Each Receipt this Period Transaction ID: 20090902-60-14-46 Amount of Each Receipt this Period Transaction ID: 20090902-60-14-46 Amount of Each Receipt this Period Transaction ID: 20090902-60-14-46 Transaction ID: 20090902-60-14-46 Amount of Each Receipt this Period Transaction ID: 20090902-60-14-46 Amount of Each Receipt this Period Transaction ID: 20090902-60-14-46 T		or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
City	∠ 4.	Thomas Scott Zach			-
FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼ State Zip Code Care Rapids FEC ID number of contributing federal political committee. Name of Employer Self-Employed City State Zip Code Self-Employed Cocupation General Insurance Agent Aggregate Year-to-Date ▼ Transaction ID: 20090902-60-14-46 Amount of Each Receipt this Period Aggregate Year-to-Date ▼ Primary General Other (Last, First, Middle Initial) Thomas Scott Zach Mailing Address 6630 County Creek Lane City Self-Employed City State Zip Code General Insurance Agent Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ State Zip Code IA 52403-7023 Date of Receipt Aggregate Year-to-Date ▼ Transaction ID: 20090921-63-18-16 Amount of Each Receipt this Period Date of Receipt Transaction ID: 20090921-63-18-16 Amount of Each Receipt this Period Date of Receipt Transaction ID: 20090921-63-18-16 Amount of Each Receipt this Period Date of Receipt Transaction ID: 20090921-63-18-16 Amount of Each Receipt this Period Primary General Insurance Agent Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼		City	State	·	0 8 1 5 2 0 0 9 Transaction ID: 20090819-60-14-0
Receipt For: Primary			C		
Thomas Scott Zach Mailing Address 6630 County Creek Lane City Cedar Rapids FEC ID number of contributing federal political committee. Primary City State Cedar Rapids Full Name (Last, First, Middle Initial) Thomas Scott Zach Mailing Address 6630 County Creek Lane Full Name (Last, First, Middle Initial) Thomas Scott Zach Mailing Address 6630 County Creek Lane City Cedar Rapids Faceipt For: Cedar Rapids Faceipt For: Cedar Rapids City State Cedar Rapids Faceipt For: Ceneral Insurance Agent Aggregate Year-to-Date ▼		Receipt For: Primary General	General	Insurance Agent e Year-to-Date ▼	
City State Zip Code Cedar Rapids IA 52403-7023 FEC ID number of contributing federal political committee. Name of Employer Self-Employed City State Zip Code General Insurance Agent Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ State Zip Code Transaction ID: 20090902-60-14-46 Amount of Each Receipt this Period 42.00 42.00 Date of Receipt Date of Receipt Transaction ID: 20090902-60-14-46 Amount of Each Receipt this Period 42.00 Date of Receipt Transaction ID: 20090902-60-14-46 Amount of Each Receipt this Period Date of Receipt Transaction ID: 20090902-60-16-16-16 Amount of Each Receipt this Period Date of Receipt Transaction ID: 20090902-60-16-16-16 Amount of Each Receipt this Period	- 3.	Thomas Scott Zach	ane		M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Thomas Scott Zach Mailing Address 6630 County Creek Lane City State Zip Code IA 52403-7023 FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt Transaction ID: 20090921-63-16-16 Amount of Each Receipt this Period Aggregate Year-to-Date ▼ Transaction ID: 20090921-63-16-16 Amount of Each Receipt this Period Aggregate Year-to-Date ▼		City	State	Zip Code	
Receipt For: Primary		FEC ID number of contributing		52403-7023	
Primary Other (specify) ▼ Sale		Name of Employer Self-Employed			
Thomas Scott Zach Mailing Address 6630 County Creek Lane City State Zip Code LA 52403-7023 FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼ Date of Receipt M M M O 9 1 1 5 7 2 0 0 9 Transaction ID: 20090921-63-16-16 Amount of Each Receipt this Period 42.00		Primary General	Aggregate	1 1 1 1 1 1 1	
City Cedar Rapids FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary Other (specify) ▼ State Zip Code IA 52403-7023 C C Transaction ID: 20090921-63-16-16 Amount of Each Receipt this Period 42.00 Aggregate Year-to-Date Receipt For: Receipt For:	-).				Date of Receipt
City State Zip Code IA 52403-7023 FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼ State Zip Code IA 52403-7023 Amount of Each Receipt this Period Accoupation General Insurance Agent Aggregate Year-to-Date ▼ 882.00		Mailing Address 6630 County Creek L	ane		
FEC ID number of contributing federal political committee. Name of Employer Self-Employed General Insurance Agent Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 882.00		•		•	Transaction ID: 20090921-63-16-16
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 882.00			C		
Primary General Other (specify) ▼ 882.00					
SUBTOTAL of Receipts This Page (optional)		Primary General	Aggregate		
V age (optional) times		SUBTOTAL of Receipts This Page (optional)			126.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS Any information copied from such Reports	for each category of the Detailed Summary Page and Statements may not be sold or used by any persor	FOR LINE NUMBER: PAGE 536 / 574 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Institute of Commercial purposes, other than using the commercial purposes, other than using the commercial purposes, other than using the commercial purposes, other than using the commercial purposes, other than using the commercial purposes, other than using the commercial purposes, other than using the commercial purposes, other than using the commercial purposes.	ng the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Thomas Scott Zach Mailing Address 6630 County Cre City Cedar Rapids FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For:	State Zip Code IA 52403-7023 C Occupation General Insurance Agent Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Thomas Scott Zach	882.00	Date of Receipt
Mailing Address 6630 County Cre City Cedar Rapids FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼	State Zip Code IA 52403-7023 C Occupation General Insurance Agent Aggregate Year-to-Date 882.00	Transaction ID: 2009102293957-63 Amount of Each Receipt this Period 42.00
Full Name (Last, First, Middle Initial) Thomas Scott Zach Mailing Address 6630 County Cre City Cedar Rapids FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify)	State Zip Code IA 52403-7023 C Occupation General Insurance Agent Aggregate Year-to-Date 882.00	Date of Receipt M M / D D / 2009 Transaction ID: 20091105152043-63 Amount of Each Receipt this Period 42.00
, , ,	nal)	126.00

SCHEDULE A (FE	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 537 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from or for commercial purposes,	such Reports and Statements ma other than using the name and ac	ay not be sold or used by any pers	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE The Northwestern Mu	(In Full) utual Life Insurance Compan	y Federal PAC	
Full Name (Last, First, M Thomas Scott Zach	iddle Initial)		Date of Receipt
Mailing Address 6630	County Creek Lane	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State	Zip Code	Transaction ID: 20091118163132-63
Cedar Rapids	<u>IA</u>	52403-7023	Amount of Each Receipt this Period
FEC ID number of contri federal political committe			42.00
Name of Employer Self-Employed	Occupati General	on Insurance Agent	
Receipt For:	Aggregat	te Year-to-Date	
Primary C Other (specify) ▼	General	882.00	
Full Name (Last, First, M Thomas D. Zale	iddle Initial)	Date of Receipt	
Mailing Address 2818	E Menlo Boulevard	07 / 15 / Y Y Y Y Y 2009	
City	State	Zip Code	Transaction ID: 20090720-822-13-0
Shorewood	WI	53211-2652	Amount of Each Receipt this Period
FEC ID number of contri federal political committe			50.00
Name of Employer NML	Occupati Managir	on ng Director	
Receipt For:		te Year-to-Date ▼	
Primary C Other (specify) ▼	General	1050.00	
Full Name (Last, First, M Thomas D. Zale	iddle Initial)		Date of Receipt
	E Menlo Boulevard		07 31 2009
City	State	Zip Code	Transaction ID: 20090804-821-10-0
Shorewood	WI	53211-2652	Amount of Each Receipt this Period
FEC ID number of contri federal political committe			50.00
Name of Employer NML	Occupati Managir	on ng Director	
Receipt For:	55 5	te Year-to-Date ▼	_
Primary ☐ Other (specify) ▼	General	1050.00	
SUBTOTAL of Receipts Ti	nis Page (optional)		142.00
	age this line number only)	`	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 538 / 574 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	Statements may not be sold or used by any persone name and address of any political committee to nce Company Federal PAC	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Thomas D. Zale Mailing Address 2818 E Menlo Boulev	vard	Date of Receipt 0 8 1 5 2 0 0 9
City Shorewood	State Zip Code WI 53211-2652	Transaction ID: 20090819-888-14-15 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer NML Receipt For: Primary General	Occupation Managing Director Aggregate Year-to-Date 1050.00	1
Other (specify) ▼ Full Name (Last, First, Middle Initial) Thomas D. Zale Mailing Address 2818 E Menlo Boulev	0 0 0 0 0 0 0 0	Date of Receipt
City	State Zip Code	0 8 3 1 2 0 0 9 Transaction ID: 20090902-888-15-1
Shorewood FEC ID number of contributing federal political committee.	WI 53211-2652	Amount of Each Receipt this Period 50.00
Name of Employer NML	Occupation Managing Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00	
Full Name (Last, First, Middle Initial) Thomas D. Zale		Date of Receipt
Mailing Address 2818 E Menlo Boulev	/ard	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Shorewood</u>	State Zip Code WI 53211-2652	Transaction ID: 20090921-883-17-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer NML	Occupation Managing Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00	
	1	1

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 539 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions oslicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ice Company	Federal PAC	
Δ A .	Full Name (Last, First, Middle Initial) Thomas D. Zale			Date of Receipt
	Mailing Address 2818 E Menlo Bouleva	09 / 30 / Y Y Y Y Y Y		
	City Shorewood	State WI	Zip Code 53211-2652	Transaction ID: 20091008104013-810 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer NML	Occupation	n g Director	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1050.00	
- В.	Full Name (Last, First, Middle Initial) Thomas D. Zale			Date of Receipt
	Mailing Address 2818 E Menlo Bouleva	10 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 20091015164625-809
	Shorewood	WI	53211-2652	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer NML	Occupation Managing	n g Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1050.00	
- С.	Full Name (Last, First, Middle Initial) Thomas D. Zale			Date of Receipt
.	Mailing Address 2818 E Menlo Bouleva	ard		10 31 2009
	City Shorewood	State W1	Zip Code	Transaction ID: 20091105152628-809
	FEC ID number of contributing federal political committee.	C	53211-2652	Amount of Each Receipt this Period 50.00
	Name of Employer NML	Occupation	n g Director	
	Receipt For: Primary General Other (specify) ▼		y Year-to-Date ▼ 1050.00	
	SUBTOTAL of Receipts This Page (optional)			150.00
	TOTAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 540 / 574 (check only one) X
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ce Company	y Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Thomas D. Zale			Date of Receipt
	Mailing Address 2818 E Menlo Bouleva	ard		11 15 2009
	City	State	Zip Code	Transaction ID: 2009111816423-809
	Shorewood FEC ID number of contributing	C	53211-2652	Amount of Each Receipt this Period 50.00
	federal political committee.			
	Name of Employer NML	Occupation Managin	on ng Director	
	Receipt For:	, '	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	1050.00	
- В.	Full Name (Last, First, Middle Initial) Diana M. Zawada			Date of Receipt
	Mailing Address N1 W311143 Wildwoo	07 15 2009		
	City	State	Zip Code	Transaction ID: 20090720-797-13-0
	Delafield	WI	53018	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		17.00
	Name of Employer NML	Occupation Dir Fac (
	Receipt For:	- '	e Year-to-Date ▼	
	Primary General	39.79	381.00	1
_	Other (specify)	0 0	301.00	
C.	Full Name (Last, First, Middle Initial) Diana M. Zawada			Date of Receipt
	Mailing Address N1 W311143 Wildwoo	od		07 31 YYYYY 2009
	City	State	Zip Code	Transaction ID: 20090804-796-10-0
	<u>Delafield</u>	WI	53018	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		17.00
	Name of Employer NML	Occupation Dir Fac (
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		381.00]
[CURTOTAL of Descripts This Perso (as least)	1		84.00
}	SUBTOTAL of Receipts This Page (optional)		······	
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 541 / 574 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	nd Statements may not be sold or used by any persong the name and address of any political committee to rance Company Federal PAC	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Diana M. Zawada Mailing Address N1 W311143 Wild	wood	Date of Receipt
City Delafield	State Zip Code WI 53018	0 8 1 5 2 0 0 9 Transaction ID: 20090819-863-14-15 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Convention	17.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation Dir Fac Ops Aggregate Year-to-Date 381.00	
Full Name (Last, First, Middle Initial) Diana M. Zawada Mailing Address N1 W311143 Wild	wood	Date of Receipt 0 8 3 1 2 0 0 9
City	State Zip Code	Transaction ID: 20090902-863-15-1
Delafield FEC ID number of contributing federal political committee.	WI 53018	Amount of Each Receipt this Period 17.00
Name of Employer NML	Occupation Dir Fac Ops	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 381.00	
Full Name (Last, First, Middle Initial) Diana M. Zawada		Date of Receipt
Mailing Address N1 W311143 Wild	wood	09 15 2009
City Delafield	State Zip Code WI 53018	Transaction ID: 20090921-858-17-1
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer NML	Occupation Dir Fac Ops	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 381.00	
SUBTOTAL of Receipts This Page (options	-0	51.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 542 / 574 (check only one) X
,	Any information copied from such Reports and or for commercial purposes, other than using t	Statements ma he name and ad	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	nce Company	/ Federal PAC	
Α.	Full Name (Last, First, Middle Initial) Diana M. Zawada			Date of Receipt
	Mailing Address N1 W311143 Wildwo	ood		09 / 30 / 2009
	City <u>Delafield</u>	State WI	Zip Code 53018	Transaction ID: 20091008104013-785 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		17.00
	Name of Employer NML	Occupation Dir Fac (
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 381.00	
_ 3.	Full Name (Last, First, Middle Initial) Diana M. Zawada	Date of Receipt		
	Mailing Address N1 W311143 Wildwo	10 15 2009		
	City	State	Zip Code	Transaction ID: 20091015164625-784
	<u>Delafield</u>	WI	53018	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			17.00
	Name of Employer NML	Occupation Dir Fac (
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	381.00	
_).	Full Name (Last, First, Middle Initial) Diana M. Zawada			Date of Receipt
	Mailing Address N1 W311143 Wildwo	ood		10
	City Delafield	State WI	Zip Code 53018	Transaction ID: 20091105152628-784 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		17.00
	Name of Employer NML	Occupation Dir Fac (
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 381.00	
	SUBTOTAL of Receipts This Page (optional)	ı		51.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 543 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar			
The Northwestern Mutual Life Insural	ice Company	Tederal FAO	
Full Name (Last, First, Middle Initial) Diana M. Zawada Mailing Address N1 W311143 Wildwor	. 1		Date of Receipt
Mailing Address N1 W311143 Wildwo	oa		11 1 15 2009
City	State	Zip Code	Transaction ID: 2009111816423-784
<u>Delafield</u>	WI	53018	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		17.00
Name of Employer NML	Occupation Dir Fac C		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 381.00	
Full Name (Last, First, Middle Initial) Rick T. Zehner			Date of Receipt
Mailing Address 203 W Ravine Baye			07 15 2009
City	State	Zip Code	Transaction ID: 20090720-1007-13-0
Bayside	WI	53217-1334	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		31.00
Name of Employer NML	Occupation VP Dist S		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 807.00]
Full Name (Last, First, Middle Initial) Rick T. Zehner			Date of Receipt
Mailing Address 203 W Ravine Baye			07 31 7 2009
City	State	Zip Code	Transaction ID: 20090804-1005-10-
Bayside	WI	53217-1334	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		31.00
Name of Employer NML	Occupation VP Dist S	Strat	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 807.00	
SUBTOTAL of Receipts This Page (optional) .			79.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 544 / 5 / 4 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur		•	
Full Name (Last, First, Middle Initial) Rick T. Zehner			Date of Receipt
Mailing Address 203 W Ravine Baye	e		08 15 2009
City Bayside	State WI	Zip Code 53217-1334	Transaction ID: 20090819-1072-14-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		31.00
Name of Employer NML	Occupation VP Dist S		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 807.00	
Full Name (Last, First, Middle Initial) Rick T. Zehner			Date of Receipt
Mailing Address 203 W Ravine Baye		0 8 3 1 2 0 0 9	
City Bayside	State WI	Zip Code 53217-1334	Transaction ID: 20090902-1072-15- Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		31.00
Name of Employer NML	Occupation VP Dist S		
Receipt For: Primary General Other (specify)		Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Rick T. Zehner			Date of Receipt
Mailing Address 203 W Ravine Baye	e		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Bayside	State WI	Zip Code 53217-1334	Transaction ID: 20090921-1065-17- Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		31.00
Name of Employer NML	Occupation VP Dist S		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 807.00	
SUBTOTAL of Receipts This Page (optiona	ıl\		93.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 545 / 574 (check only one) X
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran	ce Company	/ Federal PAC	
۷ A .	Full Name (Last, First, Middle Initial) Rick T. Zehner			Date of Receipt
	Mailing Address 203 W Ravine Baye			09 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City <u>Bayside</u>	State WI	Zip Code 53217-1334	Transaction ID: 20091008104013-991 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		31.00
	Name of Employer NML	Occupation VP Dist S		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 807.00	
ь. В.	Full Name (Last, First, Middle Initial) Rick T. Zehner	Date of Receipt		
	Mailing Address 203 W Ravine Baye	10 15 2009		
	City <u>Ba</u> yside	State WI	Zip Code 53217-1334	Transaction ID: 20091015164625-990 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00217 1004	31.00
	Name of Employer NML	Occupation VP Dist S		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 807.00	
с. С.	Full Name (Last, First, Middle Initial) Rick T. Zehner	<u> </u>		Date of Receipt
	Mailing Address 203 W Ravine Baye			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Bayside	State WI	Zip Code 53217-1334	Transaction ID: 20091105152628-990
	FEC ID number of contributing federal political committee.	C	53217-1334	Amount of Each Receipt this Period 31.00
	Name of Employer NML	Occupation VP Dist S		
	Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	e Year-to-Date ▼ 807.00	
	SUBTOTAL of Receipts This Page (optional)	1		93.00
İ	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 546 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 7
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	d Statements may not be sold or used by any pers the name and address of any political committee to ance Company Federal PAC	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Rick T. Zehner Mailing Address 203 W Ravine Baye	,	Date of Receipt
City Bayside FEC ID number of contributing	State Zip Code WI 53217-1334	Transaction ID: 2009111816423-989 Amount of Each Receipt this Period
federal political committee. Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation VP Dist Strat Aggregate Year-to-Date ▼ 807.00	31.00
Full Name (Last, First, Middle Initial) Todd O. Zinkgraf Mailing Address 118 Ferris Drive		Date of Receipt 1 1 1 5 2 0 0 9
City North Prairie FEC ID number of contributing federal political committee.	State Zip Code WI 53153-9455 C	Transaction ID: 2009111816423-1014 Amount of Each Receipt this Period 10.00
Name of Employer NML Receipt For: Primary Other (specify)	Occupation Dir Enterprise Sol Aggregate Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) Edward J. Zore Mailing Address 2505 W Dean Road		Date of Receipt
City River Hills FEC ID number of contributing federal political committee.	State Zip Code WI 53217-2010	Transaction ID: 20090720-1039-13-0 Amount of Each Receipt this Period 208.00
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation Chairman & CEO Aggregate Year-to-Date 4368.00	
SUBTOTAL of Receipts This Page (optional	<u> </u>	249.00

SCHEDULE A	A (FEC Form 3X) CEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 547 / 574 (check only one) X
or for commercial pu	rposes, other than using the	atements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMI The Northwest	ern Mutual Life Insuranc	e Company	Federal PAC	
Edward J. Zore	First, Middle Initial)			Date of Receipt
	2505 W Dean Road			07 31 2009
City <u>River Hills</u>		State WI	Zip Code 53217-2010	Transaction ID: 20090804-1037-10-0 Amount of Each Receipt this Period
FEC ID number of federal political co		C		208.00
Name of Employe	er	Occupation Chairman		7
Receipt For: Primary Other (spec	General		Year-to-Date ▼ 4368.00	
Full Name (Last, Edward J. Zore	First, Middle Initial)			Date of Receipt
Mailing Address	2505 W Dean Road	08 15 2009		
City River Hills		State WI	Zip Code 53217-2010	Transaction ID: 20090819-1105-14-1
FEC ID number of federal political co		C	35217-2010	Amount of Each Receipt this Period 208.00
Name of Employe	er	Occupation Chairman		
Receipt For: Primary Other (spec	General		Year-to-Date ▼ 4368.00	
Full Name (Last, Edward J. Zore	First, Middle Initial)			Date of Receipt
Mailing Address	2505 W Dean Road			0 8 3 1 2 0 0 9
City River Hills		State WI	Zip Code 53217-2010	Transaction ID: 20090902-1105-15-1 Amount of Each Receipt this Period
FEC ID number of federal political co		C	30217 2010	208.00
Name of Employe	er	Occupation Chairman		
Receipt For: Primary Other (spec	General		Year-to-Date ▼ 4368.00	
SUBTOTAL of Dog	eipts This Page (optional)			624.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 548 / 574 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar	e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Edward J. Zore Mailing Address 2505 W Dean Road City River Hills FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53217-2010 C Occupation Chairman & CEO Aggregate Year-to-Date 4368.00	Date of Receipt M M D D 2 0 0 9
Full Name (Last, First, Middle Initial) Edward J. Zore Mailing Address 2505 W Dean Road City River Hills FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53217-2010 C Occupation Chairman & CEO Aggregate Year-to-Date ▼ 4368.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Edward J. Zore Mailing Address 2505 W Dean Road City River Hills FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	State Zip Code WI 53217-2010 C Occupation Chairman & CEO Aggregate Year-to-Date ▼ 4368.00	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional) .		624.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 549 / 574 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A.	Full Name (Last, First, Middle Initial) Edward J. Zore		, , , , , , , , , , , , , , , , , , , ,	Date of Receipt
	Mailing Address 2505 W Dean Road City	State	Zip Code	1 0 3 1 2 0 0 9 Transaction ID: 20091105152628-1023
	River Hills	WI	53217-2010	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		208.00
	Name of Employer NML	Occupatio Chairma	n & CEO	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4368.00	
- В.	Full Name (Last, First, Middle Initial) Edward J. Zore			Date of Receipt
	Mailing Address 2505 W Dean Road	11 15 2009		
	City	State	Zip Code	Transaction ID: 2009111816423-1022
	River Hills	WI	53217-2010	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.00
	Name of Employer NML	Occupation Chairma	n & CEO	
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 4368.00	
- C.	Full Name (Last, First, Middle Initial) Jeffrey Zuzolo			Date of Receipt
	Mailing Address 104 Wildwood Drive			07 15 2009
	City	State	Zip Code	Transaction ID: 20090720-1202-13-1
	Avon FEC ID number of contributing federal political committee.	CT	06001-4413	Amount of Each Receipt this Period 208.00
	Name of Employer Self-Employed	Occupatio General	n Insurance Agent	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 4368.00	
	SUBTOTAL of Receipts This Page (optional)	1	1	624.00
f	TOTAL This Period (last page this line number	only)	·	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 550 / 574 (check only one) X
7	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insuran			on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ . .	Full Name (Last, First, Middle Initial) Jeffrey Zuzolo			Date of Receipt
	Mailing Address 104 Wildwood Drive City	State	Zip Code	0 7 3 1 2 0 0 9 Transaction ID: 20090804-1200-10-0
	Avon FEC ID number of contributing federal political committee.	CT	06001-4413	Amount of Each Receipt this Period 208.00
	Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼		nsurance Agent Year-to-Date ▼ 4368.00	7
- 3.	Full Name (Last, First, Middle Initial) Jeffrey Zuzolo Mailing Address 104 Wildwood Drive	0 0	0 0 0 0 0 0 0	Date of Receipt
	City	State CT	Zip Code	0 8 1 5 2 0 0 9 Transaction ID: 20090819-25-14-0
	Avon FEC ID number of contributing federal political committee.	C	06001-4413	Amount of Each Receipt this Period 208.00
	Name of Employer Self-Employed	Occupation General I	n nsurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4368.00	
_	Full Name (Last, First, Middle Initial) Jeffrey Zuzolo			Date of Receipt
	Mailing Address 104 Wildwood Drive			08 / 31 / 2009
	City Avon	State CT	Zip Code 06001-4413	Transaction ID: 20090902-25-14-46 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.00
	Name of Employer Self-Employed	Occupation General I	n nsurance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4368.00	
	SUBTOTAL of Receipts This Page (optional)	1		624.00

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	for ea	separate schedule(s) ach category of the iled Summary Page	FOR LINE NUMBER: PAGE 551 / 574 (check only one) X 11a 11b 11c 12
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not be state name and address of	sold or used by any perso any political committee to	n for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	ance Company Federa	al PAC	
Full Name (Last, First, Middle Initial) Jeffrey Zuzolo			Date of Receipt
Mailing Address 104 Wildwood Drive	•		09 / 15 / Y Y Y Y Y
City	State Zip	Code	Transaction ID: 20090921-25-16-16
Avon	CT 060	001-4413	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		208.00
Name of Employer Self-Employed	Occupation General Insuran	ce Agent	7
Receipt For:	Aggregate Year-to-		-
Primary General Other (specify) ▼	Aggregate Fourte	4368.00	
Full Name (Last, First, Middle Initial) Jeffrey Zuzolo	ı		Date of Receipt
Mailing Address 104 Wildwood Drive)		09 30 2009
City	State Zip	Code	Transaction ID: 20091008103448-2
Avon	CT 060	001-4413	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		208.00
Name of Employer Self-Employed	Occupation General Insuran	ce Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-	Date ▼ 4368.00	
Full Name (Last, First, Middle Initial) Jeffrey Zuzolo			Date of Receipt
Mailing Address 104 Wildwood Drive)		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip	Code	Transaction ID: 2009102293957-25
Avon	CT 060	001-4413	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		208.00
Name of Employer Self-Employed	Occupation General Insuran	ce Agent	7
Receipt For:	Aggregate Year-to-		
Primary General Other (specify) ▼		4368.00	
			624.00

TOTAL This Period (last page this line number only)

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PAGE 552 / 574 FOR LINE NUMBER: SCHEDULE A (FEC Form 3X) Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 14 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance Company Federal PAC Full Name (Last, First, Middle Initial) Date of Receipt Jeffrey Zuzolo Mailing Address 104 Wildwood Drive 10 3 1 2009 City State Zip Code Transaction ID: 20091105152043-25 Avon CT 06001-4413 Amount of Each Receipt this Period FEC ID number of contributing 208.00 C federal political committee. Name of Employer Self-Employed Occupation General Insurance Agent Receipt For: Aggregate Year-to-Date General Primary 4368.00 Other (specify) Full Name (Last, First, Middle Initial) Jeffrey Zuzolo Date of Receipt Mailing Address 104 Wildwood Drive 15 2009 City State Zip Code Transaction ID: 20091118163132-25 Avon CT 06001-4413 Amount of Each Receipt this Period FEC ID number of contributing C 208.00 federal political committee. Name of Employer Self-Employed Occupation General Insurance Agent Receipt For: Aggregate Year-to-Date ▼ Primary General

4368.00

SUBTOTAL of Receipts This Page (optional)	•	416.00
TOTAL This Period (last page this line number only)	•	112966.38

Other (specify)

CHEDULE B (FEC FOIII 3X)		rate schedule(s)		check or	E NUMBE	.n.	L	PAGE	553/5/	/4
TEMIZED DISBURSEMENTS	Detailed S	category of the Summary Page	X	21b 27	22 28a	23 28b	22	3c 🗌	25 29	26 30b
ny Information copied from such Reports and Staten r for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	e and addres	ss of any political								
The Northwestern Mutual Life Insurance C	ompany Fe	ederal PAC								
Full Name (Last, First, Middle Initial) US Bank					Date	of Disburs			0AF37I	E8674
Mailing Address 777 E.Wisconsin Ave.					0 7		1 4	2	009	
City Milwaukee	State WI	Zip Code 53202			Amou	unt of Eac	h Disbu	rsement	this Per	riod
Purpose of Disbursement Service Charge			00	01	<u> </u>			5	9.60	
Candidate Name			Cate	gory/ pe						
Senate President	ement For: Primary Other (spe	General cify) ▼	,	<u>r - </u>						
State: District: Full Name (Last, First, Middle Initial)					_			07000	DDaa	2005
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Mailing Address 777 E.Wisconsin Ave.					0 ^M 8	M / D	14	y y	o ŏ 9 ˇ	
City Milwaukee	State WI	Zip Code 53202			Amou	unt of Eac	h Disbu	rsement	this Per	riod
Purpose of Disbursement Service Charge			00	01	L.			5	4.32	
Candidate Name			Cate	egory/						
Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General cify) ▼								
Full Name (Last, First, Middle Initial) US Bank						saction IC of Disburs		9DB50	FAB37	75561
Mailing Address 777 E.Wisconsin Ave.					0 ^M 9	M / D	15	y y	o ŏ o ˇ	
City Milwaukee	State WI	Zip Code 53202			Amou	unt of Eac	h Disbu	rsement	this Per	riod
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Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General	.,	•						
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District:

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22
Any Information copied from such Reports and Statemer or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance Co	ompany Federal PAC		
Full Name (Last, First, Middle Initial) US Bank			Transaction ID: 946BD0E9439A0B223B Date of Disbursement
Mailing Address 777 E.Wisconsin Ave.			10 M / D 1 5 / Y 2 0 0 9 Y
	State Zip Code WI 53202		Amount of Each Disbursement this Period
Purpose of Disbursement Service Charge		001	57.12
Candidate Name		Category/ Type	
Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial)			Transaction ID: E7C3E690B80F3471F84
US Bank			Date of Disbursement
Mailing Address 777 E.Wisconsin Ave.			111
,	State Zip Code WI 53202		Amount of Each Disbursement this Period
Purpose of Disbursement Service Charge		001	54.01
Candidate Name		Category/ Type	
Office Sought: House Disburser Senate President	ment For: Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)		111.13
SOBIOTAL of Disbursements This Lage (optional)		
TOTAL This Period (last page this line number only)	•	279.06

State:

	CHEDULE B (FEC FOIII 3X)	Use separate schedule(s)		FOR LIN (check or		BER:	PAGE 55	55 / 574
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 28a		24 25 28c 29	30
	Information copied from such Reports and State or commercial purposes, other than using the nar							
\rangle	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	·						<u></u>
<u>/_</u>	Full Name (Last, First, Middle Initial) A Lot of People for Dave Obey				1	nsaction ID: e of Disburse	1ED1FB1139	98CF361
	Mailing Address PO Box 1322				0 ^M	9 1	^D 4 200	Ó 9 °
	City Wausau	State Zip Code WI 54402			Am	ount of Each	Disbursement thi	
	Purpose of Disbursement 2010 Primary Candidate Name)11			2500.	00
	David Robert Obey	ement For: 2010		egory/ ype				
	- I	✓ Primary General✓ Other (specify) ▼						
	Full Name (Last, First, Middle Initial) American Bankers Association PAC (BAN	IKPAC)			Dat	e of Disburse		
	Mailing Address 1120 Connecticut Aven Suite 600	ue NW			O		3 7 200	5 9 [*]
	City Washington	State Zip Code DC 20036			Am	ount of Each	Disbursement thi	
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	American Bankers Association PAC (BAN	IKPAC)	ı	egory/ ype				
	Senate	ement For: 2009 Primary General Other (specify)						
	Full Name (Last, First, Middle Initial) AMERIPAC: The Fund for a Greater Ame	rica			Dat	e of Disburse		
	Mailing Address 607 14th Street, NW, S	uite 800			1	0 0 0	9 Y 200	9 1
	City Washington	State Zip Code DC 20005			Am	ount of Each	Disbursement thi	
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	AMERIPAC: The Fund for a Greater Ame	rica		egory/ ype				
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111	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		À	21b 27	Á	22 28a	X 23 28b	-	24 28c	25 29	26 30
	r Information copied from such Reports and State or commercial purposes, other than using the nar											
$\overline{}$	NAME OF COMMITTEE (In Full)											
	The Northwestern Mutual Life Insurance	Company Federal PAC										
	Full Name (Last, First, Middle Initial) Bachus for Congress Committee							action II			63B70E	D8C2
	Mailing Address PO Box 131134						1 0	of Disbur	23		ž 0 ŏ 9	Y
	City	State Zip Code					Amou	int of Eac	h Dish	urseme	nt this P	Period
	Birmingham	AL 35213					741100	int or Eac			500.00	
	Purpose of Disbursement 2010 Primary			011							300.00	
	Candidate Name Spencer T. Bachus, III			atego Type								
	Senate 2 President	sement For: 2010 K Primary General Other (specify)										
	State: AL District: 06 Full Name (Last, First, Middle Initial)											
	Becerra for Congress						Date	saction II of Disbur	semen	t		
	Mailing Address PO Box 261060						0 ^M 9	M / D	30	/ Y	ž 0 ŏ 9	Y
	City Los Angeles	State Zip Code CA 90026					Amou	int of Eac	h Disb	urseme	nt this P	eriod
	Purpose of Disbursement 2010 Primary			011			<u></u>			1	00.00	
	Candidate Name Xavier Becerra			atego Type	-							
		sement For: 2010 C Primary General Other (specify)	1									
	Full Name (Last, First, Middle Initial) Bennett Election Committee Inc							saction II of Disbur			A3B1E	B053
	Mailing Address 175 South West Templ	e Suite 650					1 ^M 0	M / D	1 4	/ Y	ž 0 ŏ 9	Y
	City Salt Lake City	State Zip Code UT 84101					Amou	int of Eac	h Disb	urseme	nt this P	Period
	Purpose of Disbursement 2010 Primary			011			L.			2	00.00	
	Candidate Name Robert F. Bennett			atego Type								
		sement For: 2010 K Primary General Other (specify)	-									
	State: UT District:											
)					_				500.00	

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	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		<u> </u>	1b 7	22 28a	X 23 28b	-	24 28c	25 29	26 30l
	y Information copied from such Reports and State for commercial purposes, other than using the national NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	me and address of any politic									
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	Full Name (Last, First, Middle Initial) Bluegrass Committee Mailing Address 400 N Capitol St NW #	585				Date	saction II of Disbur		t	0 0 9	2A9E
	City Washington	State Zip Code DC 20001				Amo	unt of Eac	h Disbı	ursemen	t this Pe	riod
	Purpose of Disbursement 2009 Contribution Candidate Name		_	011 ategor	y/		0 0		25	00.00	
	Senate President	sement For: 2009 Primary General X Other (specify) ▼ bution		Туре							
	Full Name (Last, First, Middle Initial) Bob Corker for Senate 2012 Mailing Address PO Box 848						saction II of Disbur	sement	t	0 0 9 °	
	City Chattanooga Purpose of Disbursement 2012 Primary Candidate Name Bob Corker	State Zip Code TN 37401	Ca	011 ategor Type	y/	Amo	unt of Eac	h Disbu		t this Per	riod
	Office Sought: House Disbur	sement For: 2012 X Primary General Other (specify)	-	Туре							
	Full Name (Last, First, Middle Initial) Brad Miller for United States Congress						saction II of Disbur	sement		D3FCB	C796
	Mailing Address PO Box 10322					0 9	M / D	01	ž	0 0 9	
	City Raleigh	State Zip Code NC 27605				Amo	unt of Eac	h Disbı	ursemen	t this Pe	riod
	Purpose of Disbursement 2010 Primary		_	011		L.			10	00.00	
	Candidate Name R. Bradly Miller			ategor Type	y /						
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	UBTOTAL of Disbursements This Page (optional)			•				450	00.00	

City Somerville MA 02145 Purpose of Disbursement 2009 Special Primary Candidate Name Michael E. Capuano Office Sought: House X Senate President State: MA District: Full Name (Last, First, Middle Initial) Carper for Senate Mailing Address 19 East Commons Blvd Second Floor City State DE 19720 Purpose of Disbursement 2012 Primary Candidate Name Thomas Robert Carper Office Sought: House X State Zip Code DE 19720 Purpose of Disbursement 2012 Primary Candidate Name Thomas Robert Carper Office Sought: House X Senate President State: DE District: Full Name (Last, First, Middle Initial) Category/ Type Office Sought: House X Primary General Other (specify) ▼ State: DE District: Full Name (Last, First, Middle Initial) Castle Campaign Fund Mailing Address PO Box 133 City State Zip Code Wilmington Disbursement For: 2012 Amount of Each Disbursement To 2012 Transaction ID: 4A51AFA Date of Disbursement No 9 1 6 7 2 6 7 2 2 2 6 7 2 2 2 6 7 2 2 2 2	
NAME OF COMMITTEE (in Full) The Northwestern Mutual Life Insurance Company Federal PAC Full Name (Last, First, Middle Initial) Carpuano for Senate Committee Mailing Address 172 Central St City Somerville Michael E. Capuano Office Sought: House President State: MA District: Full Name (Last, First, Middle Initial) Carper for Senate Mailing Address 19 East Commons Bivd Second Floor City Candidate Name Michael E. Capuano Office Sought: Full Name (Last, First, Middle Initial) Carper for Senate Disbursement For: City State: MA District: Full Name (Last, First, Middle Initial) Carper for Senate Mailing Address 19 East Commons Bivd Second Floor City Purpose of Disbursement 2012 Primary Candidate Name Thomas Robert Carper Office Sought: Full Name (Last, First, Middle Initial) Carper of Senate Disbursement Disbursement Other (specify) Type Transaction ID: 11F31860 Date of Disbursement Other (specify) Type Transaction ID: 11F31860 Date of Disbursement Other (specify) Type Transaction ID: 4A51AFA Date of Disbursement Transaction ID: 4A51AFA Date of Disbursement Disbursement Transaction ID: 4A51AFA Date of Disbursement Disbursement Transaction ID: 4A51AFA Date of Disbursement Disbursement Transaction ID: 4A51AFA Date of Disbursement Disbursement Transaction ID: 4A51AFA Date of Disbursement Disbursement Transaction ID: 4A51AFA Date of Disbursement Disbursement Disbursement Transaction ID: 4A51AFA Date of Disbursement Disbursement	
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance Company Federal PAC Full Name (Last, First, Middle Initial) Capuano for Senate Committee Mailing Address 172 Central St City Somerville Somerville Somerville Mailing Address 172 Central St City Special Primary Candidate Name (Last, First, Middle Initial) Carper for Senate Mailing Address 19 East Commons Blvd Second Floor City New Castle Disbursement Colty Purpose of Disbursement Colty Purpose of Disbursement Colty Purpose of Disbursement Colty New Castle DE 19720 Purpose of Disbursement Colty Purpose of Disbursement Colty Purpose of Disbursement Colty Purpose of Disbursement Colty Purpose of Disbursement Colty Purpose of Disbursement Colty Purpose of Disbursement Colty Purpose of Disbursement Colty President Colty President Colty Purpose of Disbursement Colty Primary Candidate Name Thomas Robert Carper Office Sought: Vename Castle Campaign Fund Mailing Address PO Box 133 City Willmington State Zip Code DE 19899 Purpose of Disbursement Condidate Name Michael N. Castle Amount of Each Disbursement Disbursement Category/ Type Amount of Each Disbursement Disbursement Category/ Type Amount of Each Disbursement Category/ Type Amount of Each Disbursement Disbursement Category/ Type Amount of Each Disbursement Disbursement Category/ Type Amount of Each Disbursement Disbursement Category/ Type Amount of Each Disbursement Disbursement Category/ Type Amount of Each Disbursement Disbursement Category/ Type Amount of Each Disbursement Disbursement Category/ Type Amount of Each Disbursement Disbursement Candidate Name Candidat	
Capuano for Senate Committee Mailing Address 172 Central St City Somerville Somerville MA 02145 Purpose of Disbursement 2009 Special Primary Candidate Name Michael E. Capuano Office Sought: House New Castle Disbursement	
City State Zip Code MA 02145 Purpose of Disbursement 2009 Special Primary Candidate Name Thomas Robert Carper Office Sought: House President State Zip Code Other (specify) ▼ City State Zip Code Other (specify) ▼ City State Zip Code Other (specify) ▼ City State Zip Code Other (specify) ▼ City State Zip Code Other (specify) ▼ City State Zip Code Other (specify) ▼ City State Zip Code Other (specify) ▼ City State Zip Code Other (specify) ▼ City State Zip Code Other (specify) ▼ City State Zip Code Other (specify) ▼ City State Zip Code Other (specify) ▼ City State Zip Code Other (specify) ▼ City Candidate Name Thomas Robert Carper Office Sought: House X Senate President X Primary General Other (specify) ▼ State: DE District: Full Name (Last, First, Middle Initial) Category/ Type Office Sought: House X Senate President X Primary General Other (specify) ▼ State: DE District: Mailing Address PO Box 133 City State Zip Code Willmington DE 19899 Purpose of Disbursement 2010 Primary Candidate Name Michael N. Castle Amount of Each Disbursement 101 O11 Category/ Type Amount of Each Disbursement 101 O11 Category/ Type Amount of Each Disbursement 101 O11 Category/ Type	4F324DA598
Somerville MA 02145 Purpose of Disbursement 2009 Special Primary Candidate Name Michael E. Capuano Office Sought: House President State: MA District: Full Name (Last, First, Middle Initial) Carper for Senate New Castle Purpose of Disbursement Por: 2009 New Castle Purpose of Disbursement Por: 2009 City State Zip Code DE 19720 Purpose of Disbursement Por: 2012 Candidate Name Thomas Robert Carper Office Sought: House President State: DE District: Full Name (Last, First, Middle Initial) Castle Campaign Fund Mailing Address PO Box 133 City State Zip Code De Disbursement For: 2012 X Primary General Other (specify) ▼ Transaction ID: 11F31860 Date of Disbursement 0 9 M / D 1 6 / Y 2 Amount of Each Disbursement 0 11 Category/ Type Transaction ID: 4A51AFA Date of Disbursement 1 0 11 Category/ Type Amount of Each Disbursement 1 0 11 Category/ Type Amount of Each Disbursement 1 0 1 1 Category/ Type Amount of Each Disbursement 1 0 1 1 Category/ Type Amount of Each Disbursement 1 0 1 1 Category/ Type Amount of Each Disbursement 2010 Primary Candidate Name Michael N. Castle Amount of Each Disbursement 2010 Primary Category/ Type	2009
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Michael E. Capuano Office Sought: House President State: MA District: Full Name (Last, First, Middle Initial) Carper for Senate Mailing Address 19 East Commons Blvd Second Floor City New Castle DE 19720 Purpose of Disbursement 2012 Primary General 19720 Purpose of Disbursement 2012 Primary Other (specify) ▼ Office Sought: House President New Castle Disbursement For: 2012 Primary General President State: DE District: Full Name (Last, First, Middle Initial) Castle Campaign Fund Mailing Address PO Box 133 City State Zip Code DE 19899 Purpose of Disbursement 2012 Primary General Disbursement Tother (specify) ▼ State: Zip Code DE 19899 Purpose of Disbursement 2010 Primary De 1011 Category/ Type City State Zip Code DE 19899 Purpose of Disbursement 2010 Primary De 19899 Purpose of Disbursement 2010 Primary Candidate Name Michael N. Castle	2000.00
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Full Name (Last, First, Middle Initial) Friends of Blanche Lincoln Mailing Address PO Box 3197			Transaction ID: 7D3F723C1151891D4 Date of Disbursement M 9 M / D 2 5 / Y Y Y O Y 9
City Little Rock Purpose of Disbursement	State Zip Code AR 72203		Amount of Each Disbursement this Period 2500.00
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X Senate President State: AR District:	X Primary General Other (specify) ▼		
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	City Springfield	State Zip Code MO 65805				Amou	nt of Each D	Disbursement this Per	riod
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	Mailing Address 111 NW 183rd Street 9	uite 325				0 [™] 9	M / 2	1 2009	
	City Miami	State Zip Code FL 33169				Amou	nt of Each D	Disbursement this Per	riod
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	Full Name (Last, First, Middle Initial) Nebraska Leadership PAC							ID: 6 urseme		29315	99FAD
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	Candidate Name Rob Portman						ategory/ Type							
	Office Sought:	House X Senate President	Disburser	nent For: Primary Other (spe	2010 X General ecify) ▼									
		District: First, Middle Initial) enate Committee							action II		C608	2D85E	51B	2954E
	Mailing Address	8331 Little Har	bor Drive					10	M / D	14	Y	ž 0 ŏ	9 ^Y	
	City Cincinnati			State OH	Zip Code 45244			Amou	int of Eac	h Disbu	rseme	ent this	Perio	od
	Purpose of Disbu 2010 General	ırsement					011				2	0.000	0	
	Candidate Name Rob Portman						ategory/ Type							
	Office Sought:	House X Senate President	Disburser	nent For: Primary Other (spe	2010 X General									
_	State: OH	District:												_
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SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check o	<u> </u>	PAGE 569 / 574		
	Detailed Summary Page	21b 27	22 X 23 28a 28b			
Any Information copied from such Reports and State or for commercial purposes, other than using the nan						
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance (
Full Name (Last First Middle Initial)						
Full Name (Last, First, Middle Initial) Price for Congress			Date of Disbur			
Mailing Address PO Box 425			07 / 0	0 0 8 7 2 0 0 9		
City Roswell	State Zip Code GA 30077		Amount of Eac	ch Disbursement this Period		
Purpose of Disbursement 2010 Primary		011		1000.00		
Candidate Name Thomas E. Price		Category/ Type				
Senate) President	ement For: 2010 Primary General Other (specify)					
State: GA District: 06						
Full Name (Last, First, Middle Initial) Richard Burr Committee, The			Date of Disbur			
Mailing Address Post Office Box 5928			08 /	24 7 2009		
City Winston-Salem	State Zip Code NC 27113		Amount of Eac	ch Disbursement this Period		
Purpose of Disbursement 2010 Primary		011		3000.00		
Candidate Name Richard M. Burr		Category/ Type				
X Senate President	ement For: 2010 Primary General Other (specify)					
Full Name (Last, First, Middle Initial) Richard E Neal for Congress Committee						
Mailing Address 76 Magnolia Terrace			09 /	21 2009		
City Springfield	State Zip Code MA 01108		Amount of Eac	ch Disbursement this Period		
Purpose of Disbursement 2010 Primary		011	L	3000.00		
Candidate Name Richard E. Neal		Category/ Type				
Senate) President	ement For: 2010 Primary General Other (specify)					
State: MA District: 02						
SUBTOTAL of Disbursements This Page (optional)		>		7000.00		
TOTAL This Period (last page this line number only						

	CHEDULE B (FEC Form 3X) FEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the)	FOR LINE (check onl	NUMBER: y one)	PAGE 570 / 574
_		Detailed Summary Page		27	28a 28b	28c 29 30b
	ny Information copied from such Reports and Stater r for commercial purposes, other than using the nam					
K	NAME OF COMMITTEE (In Full)	·				
/	The Northwestern Mutual Life Insurance C	company Federal PAC				
٩.	Full Name (Last, First, Middle Initial) Scott Garrett for Congress				Date of Disbur	
	Mailing Address PO Box 905				09 / 0	1 4
	City Newton	State Zip Code NJ 07860			Amount of Eac	th Disbursement this Period
	Purpose of Disbursement 2010 Primary		_	011		1500.00
	Candidate Name E. Scott Garrett	. 5		ategory/ Type		
	Senate X President	ement For: 2010 Primary General Other (specify)				
_	State: NJ District: 05 Full Name (Last, First, Middle Initial)					
3.	Sensenbrenner Committee				Date of Disbur	
	Mailing Address PO Box 575				0 7 M / D	08 7 2009
	City Brookfield	State Zip Code WI 53008			Amount of Eac	ch Disbursement this Period
	Purpose of Disbursement 2010 Primary			011	L	1000.00
	Candidate Name F. James Sensenbrenner, Jr.			ategory/ Type		
	· -	ement For: 2010 Primary General Other (specify)				
_ >.	Full Name (Last, First, Middle Initial) Shelby for U S Senate		Date of Disbur			
	Mailing Address Post Office Box 1091				09 / 0	$\begin{array}{c c} 2 & 1 \end{array} \begin{array}{c} \\ \end{array} \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ $
	City Tuscaloosa	State Zip Code AL 35403			Amount of Eac	ch Disbursement this Period
	Purpose of Disbursement 2010 Primary			011		1000.00
	Candidate Name Richard C. Shelby			ategory/ Type		
	· —	ement For: 2010 Primary General Other (specify)	•			
_	State: AL District:					
L	SUBTOTAL of Disbursements This Page (optional)			>		3500.00
	FOTAL This Period (last page this line number only)		•		

17	EMIZED DIODUDOEMENTO	Use separate schedule(5)	(chec	only	one)						
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21	_ ⊢	22 28a	X 23 28b	F	24 28c	$\begin{bmatrix} 2 \\ 2 \end{bmatrix}$	5 9	26
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\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	NAME OF COMMITTEE (In Full)	and address of any points										
\rangle	The Northwestern Mutual Life Insurance	Company Federal PAC										
	Full Name (Last, First, Middle Initial)					Trans	saction I	D: [DFB99	9366F	CC46	SBBF
	Team Emerson for Jo Ann Emerson						of Disbu					
	Mailing Address PO Box 822					1 ^M 0		20	/ Y	ž 0	ŏ9	
	City Cape Girardeau	State Zip Code MO 63702				Amou	unt of Ead	ch Dis	sburse	ment th	nis Per	riod
	Purpose of Disbursement		Τ_		_					1000	.00	
	2010 Primary] ,	011	Ш							
	Candidate Name Jo Ann Emerson			tegory. Γуре								
	Senate President	sement For: 2010 X Primary General Other (specify) ▼										
	State: MO District: 08											
	Full Name (Last, First, Middle Initial) Tim Johnson for South Dakota Inc					Date	saction I of Disbur	seme)C72
	Mailing Address PO Box 1536					0 ^M 9	M / C	16	/ Y	ž o	ŏ9	
	City Sioux Falls	State Zip Code SD 57101				Amou	unt of Ead	ch Dis	sburse	ment th	nis Per	riod
	Purpose of Disbursement 2014 Primary			011	7					2500	.00	
	Candidate Name Tim Johnson		1	tegory Γуре								
	Office Sought: House X Senate President	sement For: 2014 X Primary General Other (specify)	•									
	State: SD District:											
	Full Name (Last, First, Middle Initial) Van Hollen for Congress						saction I of Disbur			4 5567	256A	B77
	Mailing Address 10537 St. Paul Street					1 ^M 0	M / C	20	/ Y	ž o	ý 9 [°]	
	City Kensington	State Zip Code MD 20895				Amoi	unt of Ead	ch Dis	sburse	ment th	nis Per	riod
	Purpose of Disbursement 2010 General			011	7					1000	.00	
	Candidate Name Chris Van Hollen		Ca	tegory Γуре								
	Senate President	sement For: 2010 Primary X General Other (specify) ▼	1									
	State: MD District: 08											
								-		4500		-

TEMPER DIODURO MENTO	Use separate schedule(s)	(check		NUMBE one)	-11.		I AGE	5/2/5/4
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21 27	Ĺ	22 28a	X 23 28b	\square	24 28c	25 29
Any Information copied from such Reports and State or for commercial purposes, other than using the nar									
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	Company Federal PAC								
Full Name (Last, First, Middle Initial)					Trans	saction II	D: A5	5C57F	0442408D
Van Hollen for Congress					Date	of Disbur	sement	t	
Mailing Address 10537 St. Paul Street					1 0		20	2	009
City Kensington	State Zip Code MD 20895				Amou	unt of Eac	h Disb	ursemer	nt this Period
Purpose of Disbursement 2010 Primary			011	1	L.			50	00.00
Candidate Name Chris Van Hollen			ategory/ Type						
Senate President	sement For: 2010 C Primary General Other (specify)	•							
State: MD District: 08 Full Name (Last, First, Middle Initial)					Trans	saction II) . 24	CECC11	E2496841
Wally Herger for Congress Committee					Date	of Disbur	sement	t	
Mailing Address PO Box 1500					0 7		0 9	2	009
City Chico	State Zip Code CA 95927				Amou	unt of Eac	h Disb		nt this Period
Purpose of Disbursement 2010 Primary			011	1				20	00.00
Candidate Name Walter Herger, Jr.			ategory/ Type						
	sement For: 2010 C Primary General Other (specify)								
Full Name (Last, First, Middle Initial) Wyden for Senate						of Disbur	sement	1	38440CCC
Mailing Address 232 NE 9th Avenue					0 ^M 9	M / D	0 1	ÝŽ	009
City Portland	State Zip Code OR 97232				Amou	unt of Eac	h Disb	ursemer	nt this Period
Purpose of Disbursement 2010 General			011	1	L.			35	00.00
Candidate Name Ron Wyden			ategory/ Type						
X Senate President	sement For: 2010 Primary X General Other (specify)	•							
State: OR District:									
SUBTOTAL of Disbursements This Page (optional)			•				105	00.00

	CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS	for each	parate schedule(s) n category of the d Summary Page	FOR LINE (check only 21b	NUMBER: PAGE 573 / 574 y one) 22	
	y Information copied from such Reports and Sta for commercial purposes, other than using the n			by any person t	for the purpose of soliciting contributions	
\rangle	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	e Company	Federal PAC			
	Full Name (Last, First, Middle Initial) Wyden for Senate Mailing Address 232 NE 9th Avenue				Transaction ID: B17AAEC481CC76EB5 Date of Disbursement O 9 O 1 O 2 O 9	5 <i>P</i>
	City Portland Purpose of Disbursement 2010 Primary	State OR	Zip Code 97232	011	Amount of Each Disbursement this Period 1500.00	
		ursement For:		Category/ Type		
	X Senate President State: OR District:	X Primary Other (sp	General pecify)			

SUBTOTAL of Disbursements This Page (optional)	•	1500.00
TOTAL This Period (last page this line number only)	•	108500.00

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	7 one) 22 23 24 25 26 X 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		, ,	, ,
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance Co	ompany Federal PAC		
Full Name (Last, First, Middle Initial) Jeffrey L Pawlowski			Transaction ID: B95682564D9D92DF6C6 Date of Disbursement M M / D D / Y Y Y O Y Y Y O Y Y Y O Y O Y O Y O Y
Mailing Address 2519 Northwest Marsden	Place		08 12 2009
,	State Zip Code OR 97229-9190		Amount of Each Disbursement this Period
Purpose of Disbursement Refund of FEDPAC Contributions		010	375.00
Candidate Name	C	Category/ Type	
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	>	375.00
TOTAL This Period (last page this line number only)		375.00